

**Torjager Hockey 2008 Summer Camp  
Registration Form**  
**(This form is not for Goalie Development Camps)**



**STEP 1: PLAYER INFORMATION**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail \_\_\_\_\_

**\*\*necessary to provide you with updates for your selected camp(s)\*\***

Age on Dec 31/2008 \_\_\_\_\_ (Male/Female) \_\_\_\_\_ Position Played \_\_\_\_\_

**STEP 2: FILL IN CAMP CODE (this form is for all camps except goalie camps)**

Camp Code(s) \_\_\_\_\_

**STEP 3: PAYMENT**

Payment Enclosed \$ \_\_\_\_\_

**(Include full payment or deposit of \$100 per camp; balance payable 1st day of camp.)**

**Cheque** - payable to **Torjager Hockey**

**Cash or Money Order**

**STEP 4: PLEASE READ AND SIGN WAIVER:**

In consideration of the participant being permitted to participate in Torjager Hockey Camps we do discharge Marty Yewchuk, Torjager Hockey Ltd. and any person connected herewith from all manner or action, injury, damages, costs, claims or demands which of such participation in the program. It is further agreed that Marty Yewchuk and associated parties are not responsible for any lost or stolen hockey equipment or personal articles. The release shall be binding on our heirs, assigns, executors and administrators.

\_\_\_\_\_  
(Signature of Parent)

\_\_\_\_\_  
(Print Parent's Name)

\_\_\_\_\_  
(Date)

**Mail or Fax to:**

**Torjager Hockey Ltd.**  
Suite # 929,  
105-150 Crowfoot Cres. NW Calgary, AB T3G 3T2  
Tel. (403) 275-3948 Fax. (403) 637-8651  
[www.torjagerhockey.com](http://www.torjagerhockey.com)