

CPYHA Dynamo SQ- PW maj/min, Girls 12U

2014-2015 Season

Please complete the information below. **ALL** information is required. Use 1 form per player.
Tryout Fee \$40 check made payable to CPYHA.

POSITION: _____

LAST NAME: _____ FIRST NAME: _____

DATE OF BIRTH: _____ GENDER: _____

ADDRESS: _____

HOME PHONE: _____ WORK: _____

PARENT (LEGAL GUARDIANS) NAMES:

EMAIL ADDRESS: _____

HISTORY OF LEAGUE/YOUTH HOCKEY PLAY: (please list last 3 years-starting from the most recent downward)

ORGANIZATION	LEVEL (A,B, C) Maj/Min	AGE DIVISION Mite/SQ/PW
2013/14		
2012/13		
2011/12		

Note: If your last youth hockey play was not with CP Dynamo or CPYHA, a release form is required prior to registering, trying out for and stepping on the ice for ANY CP teams. If you were with a non NY State Team last season, we still require you to have a letter submitted from your prior organization that your financial obligation has been met with your previous organization.

2014/15 (Team trying out for Circle one): CP Dynamo SQ Major 04 or SQ Minor 05

CP Dynamo PW Major 02 or PW Minor 03 CP Dynamo 12U Girls

Parent/Legal Guardian Signature _____