

Vermont State Amateur Hockey Association

Vermont Selects Try Out Registration

2007/2008

U14 Full Season (Birth Year 1993/1994)

Name: _____

Address: _____

City: _____ **State:** _____ **ZIP:** _____

Birth Date: _____ **Email:** _____

Parent/Gaurdian: _____

Phone # Home: _____ **Work:** _____ **Cell:** _____

2006/2007 Team you played for: _____

Registration Fee is \$10

Registration Deadline: November 19th, 2007

(Checks made out to "Vermont Selects")

VSAHA – Vermont Selects

Attn: Nate Isham

PO Box 503

Waterbury, VT 05676

For more information:

Nate@vtselects.org or 802-793-9191