Wyoming Cutthroats 2021-2022

Travel Team Registration Form

MING CUTTHO	Player Name:				
	Date of Birth:				
	City:		State:	Zip:	
HOCKEY	2021-2022 USA Hoc				
	2021 2022 03/1100	ikey italiibe			
Pa	rent/Guardian:				
					coll
	Phone Number:				
En	nail:				
Pa	rent/Guardian:				
Phone Number:					cell.
Fm	nail:				
Te	am Trying Out For:	12U	14U		
If Selected Would \	our Player be Willing	to Play for	a Secondary ⁻	Team:	Yes No
Pri	mary Position:	Forward	Defense	Goalie	
Se	condary Position:	Forward	Defense		
(only select a	Secondary Position if your play	er would be wil	lling to play that po	osition for the	e season)
Preferi	ed Jersey Number (to	n 3 choices):		
	ing players will have jersey nur				
This section to be filled out	hy team nersonnel:				
\$35 Tryout registration fee		r colocted)			
	(if player is elected to participate on:				
Credit Card information if p	, - ,				
Expiration Date:	CCV #:				
Checking information if pay	ing hy check:				
Check #	• ,	<u>.</u>			