



WESTMOUNT ELEMENTARY SCHOOL

220 Wheatland Trail, Strathmore, Alberta T1P 1B2

Tel. (403) 934-3041 ~ Fax (403) 934-4936

Principal: Mr. Wayne Funk ~ Associate Principals: Mr. Dana Graff, Mrs. Tausha Braithwaite

Hockey Program Registration Form 2018-2019

Personal Information

Student Athlete Legal Name: _____
 Mailing Address: _____
 Grade (as of Sept. 2018): _____ Age (as of Sept. 2018): _____
 City: _____ Prov: _____ Postal Code: _____ Gender: _____
 Home Phone: _____ Birth Date (yyyy/mm/dd): _____
 Current School: _____ School District: _____

Sports Information

Club Association: _____ Please Circle (for 2018/2019 season): Atom/PeeWee
 Position(s) Played: _____ How many years played? _____
 Last Coach's Name: _____ Last Coach's Phone Number: _____

Signatures

Parent/Guardian Signature

I grant my son/daughter permission to participate in the Westmount Hockey Program for the 2018/2019 school year. I certify that all information on this application is true and complete.

Parent/Guardian Name (please print): _____
 Signature: _____ Date: _____
 Parent's E-mail: _____ Cell Phone: _____

Financial Information

Registration Fee\$350.00

Registration Fee includes about 38 ice times, transportation to and from Strathmore Family Center and coaching. Registration fee is due at time of registration. Please make cheque payable to Westmount School.

Registration Information

We are capping our program at 50 student athletes and registrations will be accepted starting May 30th at 8:00am. Full payment must accompany this registration form.



