



TEAM REGISTRATION FORM

Local Association: BPR		Team Name: BP Phantoms U9 Black	
Level		Age Group - Please check one	
<input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B		<input checked="" type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate
					Y
1	3	Grace	Kozan	F	2007
2	10	Chicilo	Lola	F	2006
3	1	McLellan	Hannah	F	2004
4	13	Elder	Kate	F	2008
5	7	Elder	Avery	F	2005
6	4	Switzer	Avery	F	2006
7	6	Fullerton	Halle	F	2005
8	8	Gorniak	Faith	F	2004
9	5	Dovell	Peyton	F	2004
10					
11					

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	McLellan	Craig	M	
<input type="checkbox"/>	Asst.Coach	Fullerton	Kathryn	F	
<input type="checkbox"/>	Asst. Coach	Switzer	Leslie	F	
<input type="checkbox"/>	Asst. Coach	Elder	Lance	M	
<input type="checkbox"/>	Asst. Coach	Kozan	Paul	M	

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)



TEAM REGISTRATION FORM

Local Association: Buffalo Plains		Team Name Red
Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B		Age Group - Please check one <input checked="" type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate
					Y
1	7	Nichol	Myaah	F	2003
2	6	Doig	Anna	F	2005
3	2	Day	Rhielle	F	2006
4	15	Nagy	Alyssa	F	2006
5	5	Ruetz	Olivia	F	2005
6	9	Ruetz	Anthony	M	2006
7	11	Korsberg	Kennedy	F	2005
8	8	Korsberg	Carter	M	2007
9	4	Barnard	Desiree	F	2005
10	3	Thompson	Macie	F	2006
11					
12					
13					
14					
15					
16					
17					
18					

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input checked="" type="checkbox"/>	Coach	Nagy	Ken	M	
<input type="checkbox"/>	Asst.Coach	Ruetz	Jeff	M	
<input type="checkbox"/>	Asst. Coach	Thompson	Donnie	M	
<input type="checkbox"/>	Asst. Coach	Day	Shawna	F	
<input type="checkbox"/>	Asst. Coach	Barnard	Deidre	F	
<input type="checkbox"/>	Trainer				

include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if a

TEAM REGISTRATION FORM



Local Association: Buffalo Plains

Team Name: BP Phantoms U9 White

Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B	Age Group - Please check one <input checked="" type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	Home Color:	White
		Away Color:	None

Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
				Y		
1	9	Babyak	Michael	M	2006	
2	16	Babyak	Samantha	F	2004	
3	2	Lang	Mazzlynn	F	2005	
4	3	O'Donnell	Kenadi	F	2005	
5	12	Kuculym	Ava	F	2006	
6	8	Lafontaine	Ava	F	2006	
7	1	Friess	Hanna	F	2006	
8	15	Friess	Ethan	M	2004	
9	5	Kornum	Alex	F	2005	
10						
11						
12						
13						
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Lang	Kim	F	
<input type="checkbox"/>	Asst.Coach	Lang	Jamie	F	
<input type="checkbox"/>	Asst. Coach	O'Donnell	Amanda	F	
<input type="checkbox"/>	Asst. Coach	Babyak	Jason	M	
<input type="checkbox"/>	Manager	Lafontaine	Lana	F	
<input type="checkbox"/>	Trainer				

el 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable

TEAM REGISTRATION FORM



Local Association: Buffalo Plains

Team Name: BP Phantoms U10 Black

Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B	Age Group - Please check one <input type="checkbox"/> U9 <input checked="" type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	Home Color:	Black
		Away Color:	None

Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
				Y		
1	2	Corney	Abby	F	2002	
2	15	Nyeste	Teagan	F	2003	
3	9	Kosar	Megan	F	2002	
4	8	Korsberg	Kayla	F	2002	
5	4	Ruetz	Megan	F	2002	
6	11	Freeman	Hannah	F	2003	
7	6	Jorgenson	Taleigha	F	2003	
8	12	Kozan	Holland	F	2002	
9	3	Kozan	Ellison	F	2002	
10	5	Kozan	Sara	F	2002	
11	7	Mitchall	Danielle	F	2002	
12						
13						
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Kozan	Paul	M	
<input type="checkbox"/>	Asst.Coach	Mitchall	Derek	M	
<input type="checkbox"/>	Asst. Coach	Terri	Corney	F	
<input type="checkbox"/>	Asst. Coach	Mitchall	Dale	F	
<input type="checkbox"/>	Manager	Kozan	Andrea	F	
<input type="checkbox"/>	Trainer				

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)



TEAM REGISTRATION FORM

Local Association: Buffalo Plains		Team Name: BP Phantoms U10 White	
Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B		Age Group - Please check one <input type="checkbox"/> U9 <input checked="" type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	
Home Color:		White	
Away Color:		None	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
					Y		
1	9	Ikert	Kaitlyn	F	2002		
2	3	Hextall	Brooklyn	F	2003		
3	8	Bereti	Hayley	F	2003		
4	15	Diamond	Alexis	F	2002		
5	7	Lockert	Megan	F	2004		
6	6	McLennan	Serina	F	2003		
7	12	Oswald	Jaydah	F	2003		
8	11	Paterson	Abby	F	2002		
9	17	Schneider	Jessica	F	2002		
10	5	Schoenroth	Kirsten	F	2003		
11	4	Zaremba	Haley	F	2003		
12							
13							
14							
15							
16							
17							
18							

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Hextall	Curtis	M	
<input type="checkbox"/>	Asst. Coach	Schoenroth	Cheryl	F	
<input type="checkbox"/>	Asst. Coach	Paterson	Jeff	M	
<input type="checkbox"/>	Asst. Coach	Zaremba	Amanda	F	
<input type="checkbox"/>	Manager	Hextall	Denise	F	
<input type="checkbox"/>	Trainer				

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)



TEAM REGISTRATION FORM

Local Association: BPPRA		Team Name: Black Phantoms	
Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B		Age Group - Please check one <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input checked="" type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	
		Home Color:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1	5	Foster	Jaiden	F	2000	
2	1	Nichol	Emma	F	2000	
3	15	Armstrong-Christens	Mia	F	2000	
4	8	Hastings	Sadie	F	2001	
5	12	Hess	Jordyn	F	2001	
6	14	Ikert	Mackenzie	F	2000	
7	4	Sulymka	Jessie	F	2001	
8	16	Hoffman	Jillian	F	2001	
9	11	Schick	Sarah	F	2000	
10						
11						
12						
13						
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Hess	Toby	M	
<input type="checkbox"/>	Asst.Coach	Schick	Darren	M	
<input type="checkbox"/>	Asst. Coach	Hastings	Shaun	M	
<input type="checkbox"/>	Asst. Coach	Hastings	Lisa	F	
<input type="checkbox"/>	Asst. Coach	Ikert	Anita	F	

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TEAM REGISTRATION FORM



Local Association: BPR

Team Name: White Phantoms

Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B	Age Group - Please check one <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input checked="" type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	Home Color:
		Away Color:

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1	4	Galloway	Kristyn	F	2001	
2	17	Dauk	Janessa	F	2001	
3	7	Kirby	Kayla	F	2001	
4	6	Lumb	Abby	F	2000	
5	3	Prosser	Ashley	F	2001	
6	14	Silzer	Jaelyn	F	2001	
7	12	Wilson	Peyton	F	2001	
8	1	Ballman	Bernadette	F	2001	
9	9	Eberts	MacKenzie	F	2000	
10	8	Price	Naomi	F	2001	
11						
12						
13						
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Delesoy	Amanda	F	
<input type="checkbox"/>	Asst. Coach	Kirby	Karen	F	
<input type="checkbox"/>	Asst. Coach	Aitken	Colleen	F	
<input type="checkbox"/>	Asst. Coach	Lumb	Ken	M	
<input type="checkbox"/>	Manager	Ballman	Teres	F	
<input type="checkbox"/>	Trainer				

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)

TEAM REGISTRATION FORM



Local Association: Buffalo Plains

Team Name: BP Phantoms U12 Red

Level	Age Group - Please check one	Home Color:	Red
<input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B	<input type="checkbox"/> U9 <input type="checkbox"/> U10 <input checked="" type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	Away Color:	None

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
					Y		
1	2	Palfy	Jordyn	F	2001		
2	5	Weimer	Haylee	F	2000		
3	1	Johnson	Lexi	F	1999	OVERAGE	
4	17	Wagner	Rilla	F	2000		
5	16	Fullerton	Wade	F	2001		
6	14	Graham	Julia	F	2001		
7	4	Pekrul	Piper	F	2001		
8	8	Dovell	Mikayla	F	2001		
9	3	Pollock	Bradie	F	2000		
10							
11							
12							
13							
14							
15							
16							
17							
18							

TEAM STAFF

	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Olah-Palfy	Carmen	F	
<input type="checkbox"/>	Asst. Coach	Fullerton	Brandt	M	
<input type="checkbox"/>	Asst. Coach	Wagner	Glen	M	
<input type="checkbox"/>	Asst. Coach	Weimer	Dennis	M	
<input type="checkbox"/>	Asst. Coach	Fullerton	Kathryn	F	

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)

TEAM REGISTRATION FORM



Local Association: Buffalo Plains

Team Name: BP U12 Rush

Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B	Age Group - Please check one <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input checked="" type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	Home Color: Red	Away Color: None
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Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
				Y		
1	Pow	Carli	F	2001		
2	Johnson	Jasmine	F	2000		
3	Cale	Jaycee	F	2000		
4	Skaar	Samantha	F	2000		
5	Corney	Hannah	F	2000		
6	Yeager	Danielle	F	2000		
7	Markwart	Anna	F	2000		
8	Nimegeers	Claire	F	2002		
9	Nimegeers	Abby	F	2000		
10	Nagy	Erika	F	2001		
11	Heerspink	Danica	F	2000		
12	McKechnie	Payton	F	2001		
13	Masney	Journey	F	2000		
14						
15						
16						
17						
18						

TEAM STAFF

	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Butz	Colleen	F	
<input type="checkbox"/>	Asst. Coach	Nimegeers	Barron	M	
<input type="checkbox"/>	Asst. Coach	Nagy	Ken	M	
<input type="checkbox"/>	Asst. Coach	Purdue	Scott	M	
<input type="checkbox"/>	Asst. Coach	Corney	Terri	F	

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)

TEAM REGISTRATION FORM



Local Association: Buffalo Plains Team Name: BP Phantoms U14 Bl

Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B	Age Group - Please check one <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input checked="" type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	Home Color: Black	Away Color: None
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Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		
				Y		
1	12	Reifferscheid	Mykinna	F	1999	
2	1	Moore	Haylee	F	1999	
3	16	Weimer	Jade	F	1998	
4	8	Kozack	Shai	F	1999	
5	9	Nagy	Jessica	F	1999	
6	5	Nakonechni	Haley	F	1999	
7	2	Sulymka	Sydney	F	1999	
8	14	Beck	Michaela	F	1998	
9	15	Clark	Karlee	F	1998	
10	17	Tangedal	Alix	F	1998	
11		Clark	Kori	F	1998	
12						
13						
14						
15						
16						
17						
18						

TEAM STAFF

List max. of 5	Surname	Given Name	M/F	Certification *	
<input checked="" type="checkbox"/>	Coach	Reifferscheid	Trent	M	
<input checked="" type="checkbox"/>	Asst.Coach	Sulymka	Shelly	F	
<input checked="" type="checkbox"/>	Asst. Coach	Moore	Leanne	F	
<input checked="" type="checkbox"/>	Asst. Coach	Moore	Rob	M	
<input checked="" type="checkbox"/>	Asst. Coach	Weimer	Jackie	F	

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)

TEAM REGISTRATION FORM



Local Association: Buffalo Plains		Team Name: BP Phantoms U14 White	
Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B	Age Group - Please check one <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input checked="" type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+		Home Color: White Away Color: None

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
						Y	
1	18	Foster	Jordan	F		1999	
2	12	Foster	Janelle	F		1998	
3	3	Foster	Jocelyn	F		1998	
4	6	Hastings	Sarah	F		1999	
5	8	Hess	Briana	F		1999	
6	14	Schick	Emily	F		1999	
7	2	Dobson	Chase	F		1998	
8	7	Potts	Cassandra	F		1999	
9	1	Dielschneider	Jenaya	F		1999	
10	16	Olson	Bryn	F		1998	
11	11	Kosar	Jessica	F		1999	
12							
13							
14							
15							
16							
17							
18							

TEAM STAFF						
	List max. of 5	Surname	Given Name	M/F	Certification *	
<input type="checkbox"/>	Coach	Foster	John	M		
<input type="checkbox"/>	Asst.Coach	Foster	Pam	F		
<input type="checkbox"/>	Asst. Coach	Hess	Toby	M		
<input type="checkbox"/>	Asst. Coach					
<input type="checkbox"/>	Manager	Kosar	Tammy	F		
<input type="checkbox"/>	Manager					

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)



TEAM REGISTRATION FORM

Local Association: Buffalo Plains

Team Name: BP U16

Level <input type="checkbox"/> AA <input type="checkbox"/> A <input checked="" type="checkbox"/> B	Age Group - Please check one <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input checked="" type="checkbox"/> U16 <input type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+	Home Color:	
		Away Color:	

Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
				Y		
1	6	Stewart	Piper	F	1998	
2	5	Lafontaine	Disa	F	1997	
3	7	Yeager	Amanda	F	1997	
4	11	Turgeon	Katy	F	1997	
5	9	Stamm	MacKenzie	F	1997	
6	12	Ratray	Kelsea	F	1997	
7	16	Merk	Kathy	F	1996	
8	8	Knudsen	Sarah	F	1997	
9	3	Hess	Madisen	F	1996	
10	2	Hawman	Nicole	F	1997	
11	4	Ruecker	Samantha	F	1996	
12	1	Day	Taylor	F	1997	
13						
14						
15						
16						
17						
18						

TEAM STAFF					
List max. of 5	Surname	Given Name	M/F	Certification *	
<input checked="" type="checkbox"/>	Coach	Knudsen	Rachel	F	
<input checked="" type="checkbox"/>	Asst.Coach	Turgeon	Janet	F	
<input checked="" type="checkbox"/>	Asst. Coach	Coxford	Chelsie	F	
<input checked="" type="checkbox"/>	Asst. Coach	Renner	Faye	F	
<input checked="" type="checkbox"/>	Asst.Coach	Yeager	Murray	M	
<input checked="" type="checkbox"/>	Trainer/Manager	Stamm	Shelley	F	

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)

TEAM REGISTRATION FORM



Local Association: **Buffalo Plains Open C**

Team Name: **Extreme**

Level <input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> B	Age Group - Please check one <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input checked="" type="checkbox"/> 18+ <input type="checkbox"/> 30+	Home Color: 	Black
		Away Color:	White

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	E-mail
					Y	
1	16	Rushinko	McKenzie	F	93	
2	10	Masson	Kelsey	F	93	
3	27	Masson	Jenell	F	93	
4	6	Lavallee	Brittany	F	93	
5	4	Rafuse	Kaydin	F	92	
6	3	Bone	Kelsey	F	93	
7	14	Stang	Taryn	F	85	
8	30	Johnson	Breanne	F	93	
9	21	Geschwandtner	Kylie	F	92	
10	12	Foster	Jaimie	F	95	
11	8	Munro	Morgan	F	92	
12		Stolz	Quinton	M	74	
13		Foster	Pam	f	73	
17		Tiefenbach	Alyssa	f	91	
18						

TEAM STAFF						
	List max. of 5	Surname	Given Name	M/F	Certification *	
<input checked="" type="checkbox"/>	Coach	Johnson	Eric	M		
<input checked="" type="checkbox"/>	Asst. Coach	Stang	Elaine	F		
<input type="checkbox"/>	Asst. Coach	Hill	Carrie	F		
<input type="checkbox"/>	Asst. Coach					
<input checked="" type="checkbox"/>	Manager	Masson	Lori	F		
<input type="checkbox"/>	Trainer	Johnston	Kelly	F		

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)

TEAM REGISTRATION FORM



Local Association: **Buffalo Plains**

Team Name: **BP Valkyries**

Level <input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> B	Age Group - Please check one <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input type="checkbox"/> U19 <input checked="" type="checkbox"/> 18+ <input type="checkbox"/> 30+	Home Color:	Blue
		Away Color:	White and Blue

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
					Y		
1	3	Greenaway	Kelly	F	77		
2	9	Delesoy	Amanda	F	81		
3	29	Giles	Crystal	F	67		
4	13	Dauk	Amanda	F	82		
5	37	Perkins	Susan	F	69		
6	11	Kirstein	Bobbi	F	70		
7	8	Maclennan	Stephanie	F	82		
8	16	Metz	Morgan	F	89		
9	7	Hastings	Erin	F	78		
10	26	Kydd	Kimberly	F	75		
11	1	Slater	Marlis	F	73		
12	99	Foreman	Debbie	F	81		
13	22	Wharton	Tammy	F	61		
14	12	Kress	Sandra	F	69		
15	20	Clement	Susan	F			
16	34	Criddle	Kaytlyn	F			
17		Slater	Erika	F	93		
18		Brooks	Heather	F	77		

TEAM STAFF

	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Phillips	Alice	F	
<input type="checkbox"/>	Asst.Coach	Greenaway	Kevin	F	
<input type="checkbox"/>	Asst. Coach	Metz	Curtis	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager				
<input type="checkbox"/>	Trainer				

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)

TEAM REGISTRATION FORM

Local Association: Buffalo Plains		Team Name: Hellraisers	
Level	Age Group - Please check one	Home Color:	Red & White
		Away Color:	White & Red

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
					Y		
1	03	Stronach	Lesley	F	80		
2	04	Kingston	Kendal	F	80		
3	06	Hansen	Jill	F	83		
4	8	Lang	Kimberly	F	82		
5	9	Lang	Jamie	F	85		
6	10	Folk	Celeste	F	83		
7	13	Church	Jill	F	78		
8	16	Young	Cherie	F	80		
9	17	Cavanagh	Bree	F	83		
10	18	Galandie	Daphne	F	77		
11	23	Keil	Mandy	F	79		
12	31	Stang	Jesse	M	89		
13	25	Zerr	Kristin	F	84		
14	32	Butz	Colleen	F	74		
15	44	Odonnell	Amanda	F	79		
16	49	Schonhoffer	Jessica	F	85		
17							
18							

TEAM STAFF				
List max. of 5	Surname	Given Name	M/F	Certification *
Coach	Lang	Richard	M	
Asst.Coach	Couture	Pete	M	
Asst. Coach				
Asst. Coach				
Manager	Lang	Donna	F	
Trainer				

*Please include highest level of certification (Level 1/2, CSI, CI, Managers Certification, First Aid Training or None if applicable)