

TEAM REGISTRATION FORM



Local Association: Saskatoon		Team Name: Fireflies	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate		E-mail
					Y		
1		Johnson	Morgan	F	2003		
2		Kinar	Jordan	F	2004		
3		Mawson	MacKenzie	F	2005		
4		McCrae	Jetta	F	2006		
5		Nordmarken	Taya	F	2004		
6		Page	Jorja	F	2005		
7		Thompson	Raelyn	F	2005		
8		Topping	Meg	F	2005		
9		Wolfe	Danika	F	2003		
10		Zentner	Ella	F	2004		
11		Waddell	Hannah	F	2004		
12							
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TEAM STAFF						
	List max. of 5	Surname	Given Name	M/F	Certification *	
<input type="checkbox"/>	Coach	McCrae	Scott	M		
<input type="checkbox"/>	Asst.Coach	Thompson	Candi	F		
<input type="checkbox"/>	Asst. Coach					
<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: Saskatoon			Team Name: Bumble Bees		
Level		Age Group - Please check one			Home Color:
<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+			Away Color:

Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
				Y	
1	Brown	Jacalyn	F		
2	Burgess	Payton	F	2004	
3	Fauvelle	Gwen	F	2005	
4	Matisz	Leyna	F	2004	
5	Norum	Kenley	F	2005	
6	Olsen	Kiera	F	2006	
7	Pardy	Abigail	F	2005	
8	Pesenti	Emilia	F	2007	
9	Spence	Abby	F	2004	
10	Willis	Rebekah	F	2004	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Burgess	Terry	F	
<input type="checkbox"/>	Asst.Coach	Pardy	Melissa	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Norum	Aaron	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: Saskatoon		Team Name: Flaming Hearts	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate
					Y
1		Demchenko	Gabby	F	2006
2		Hobbs	Rebecca	F	2003
3		Irvine	Aliya	F	2003
4		Leason	Kennedi	F	2003
5		Lessard	Ava	F	2006
6		Lockyear	Brooklyn	F	2004
7		Mutch	Naomi	F	2005
8		Pickerl	Ashley	F	2003
9		Serhyenko	Aleyse	F	2006
10		Weiland	Avery	F	2005
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Pickerl	Trevor	M	
<input type="checkbox"/>	Asst.Coach	Weiland	Tricia	F	
<input type="checkbox"/>	Asst. Coach				
<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: Saskatoon		Team Name: Ringers	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Britton	Shea	F	2003	
2		Dowling	Shalayne	F	2004	
3		Dumonceaux	Natalie	F	2004	
4		Gherasim	Kaylee	F	2003	
5		Ho	Kristin	F	2003	
6		Krienke	Reese	F	2004	
7		Schindel	Faith	F	2005	
8		Schultz	Tegan	F	2003	
9		Scopick	Kennedy	F	2004	
10		Stianson	Liv	F	2004	
11		Thibault	Abigail	F	2004	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Britton	Tim	M	
<input type="checkbox"/>	Asst.Coach	Anderson	Kristin	F	
<input type="checkbox"/>	Asst. Coach	Schultz	Adam	M	
<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: Saskatoon		Team Name: Dynamite		
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:
		Away Color: 		

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Barsi	Arieanna	F	2003	
2		Ducharme	Jordyn	F	2003	
3		Gray	Kennedy	F	2002	
4		Hinz	Alyssa	F	2002	
5		Irvine	Kalandra	F	2002	
6		Irvine	Kara	F	2003	
7		Kilcher	Marie	F	2003	
8		McLean	Sarah	F	2002	
9		Oleksyn	Paris	F	2003	
10		Pearson	Brooklyn	F	2002	
11		Peterson	Bailey	F	2003	
12		Purdy	Maiya	F	2003	
13		Read	MacKenzie	F	2002	
14		Smith	Chloe	F	2002	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Barsi	Lorelie	F	
<input type="checkbox"/>	Asst.Coach	Read	Trevor	M	
<input type="checkbox"/>	Asst. Coach	Ducharme	Carrie	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Peterson	Terri	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: Saskatoon		Team Name: Fire Rings	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Biever	Haylie	F	2002	
2		Campbell	Icis	F	2002	
3		Dale	Sierra	F	2003	
4		Fleury	Keala	F	2002	
5		Fleury	Maya	F	2002	
6		Gulka	Mary	F	2002	
7		Hahn	Mykelti	F	2002	
8		Hanson	Abby	F	2003	
9		Mawson	Halle	F	2002	
10		McCrae	Annika	F	2002	
11		McHarg	Ashley	F	2003	
12		Prokop	Nicole	F	2003	
13		Whittaker	Emily	F	2002	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Hanson	Stacy	F	
<input type="checkbox"/>	Asst.Coach	Biever	Dwayne	M	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager				
<input type="checkbox"/>	Trainer				

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TEAM REGISTRATION FORM



Local Association: Saskatoon		Team Name: Rockstars	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Etheir	Reese	F	2003	
2		Klemecki	Tehya	F	2003	
3		Kushniruk	Makena	F	2003	
4		Kutney	Haylie	F	2002	
5		Linklater	Ava	F	2002	
6		Mutch	Annika	F	2002	
7		Nochowny	Skylar	F	2003	
8		O'Reilly	Lauren	F	2002	
9		Strausser	Kaylee	F	2003	
10		Trask	Madison	F	2003	
11		Vandale	Ayshia	F	2002	
12		Mock	Chance	M	2002	
13		Bobryk	Skylar	F	2002	
14		Skutelnik	Rebecca	F	2003	
15						
16						
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Etheir	Trevor	M	
<input type="checkbox"/>	Asst.Coach	Kushniruk	Russ	M	
<input type="checkbox"/>	Asst. Coach	Kutney	Karen	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Vandale	Maureen	F	
<input type="checkbox"/>	Trainer				

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TEAM REGISTRATION FORM



Local Association: Saskatoon		Team Name: Thunder	
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: Away Color:

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate
					Y
1		Bremner	Alexandra	F	2003
2		Byers	Gina	F	2003
3		Duret	Brittney	F	2002
4		Gadd	Jordan	F	2002
5		Harder	Brooklyn	F	2002
6		Heidt	Emily	F	2002
7		Heidt	Samantha	F	2004
8		Kruger	Lexi	F	2002
9		Page	Tia	F	2003
10		Reed	Meadow	F	2003
11		Semchyshen	Leah	F	2003
12		Unrau	Bailey	F	2003
13		Voykin	Jordyn	F	2002
14		Zentner	Elizabeth	F	2002
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16					
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Semchyshen	Richard	M	
<input type="checkbox"/>	Asst.Coach	Ens	Terri	F	
<input type="checkbox"/>	Asst. Coach	Duret	Norm	M	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Kruger	Darren	M	
<input type="checkbox"/>	Trainer				

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TEAM REGISTRATION FORM



Local Association: Saskatoon		Team Name: Silverbacks	
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	Abrook	Jaden	F	2000	
2	Azure-Spence	Madison	F	2000	
3	Bremner	Madison	F	2000	
4	Fleury-Lucas	Laila	F	2000	
5	George	Chloe	F	2000	
6	Hills	Kami	F	2000	
7	Ho	Jaden	F	2001	
8	Krienke	Ryan	F	2000	
9	Parent	Emilie	F	2000	
10	Rock	Madison	F	2000	
11	Strasser	Mackenna	F	2000	
12	Yuzicapi	Cheyenne	F	2000	
13					
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Cochrane	Joe	M	
<input type="checkbox"/>	Asst.Coach	Fleury	Eugene	M	
<input type="checkbox"/>	Asst. Coach	Yuzicapi	Pam	F	
<input type="checkbox"/>	Asst. Coach	Strasser	Hollee	F	
<input type="checkbox"/>	Manager	Azure-Spence	Colin	M	
<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: Saskatoon		Team Name: Toxic	
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		Angelstad	Teah	F	2001	
2		Blomquist	Sarah	F	2002	
3		Evenson	Kira	F	2000	
4		Galloway	Kendra	F	2001	
5		Holmes	Madison	F	2001	
6		Janzen	Mackenzie	F	2001	
7		Leonard	Sierra	F	2001	
8		Lissel DeCorby	Aida	F	2001	
9		McCrae	Tessa	F	2000	
10		Power	Erika	F	2001	
11		Power	Jillian	F	2001	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Galloway	Duane	M	
<input type="checkbox"/>	Asst.Coach	Janzen	Dean	M	
<input type="checkbox"/>	Asst. Coach	McAdam	Bre	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Janzen	Bonita	F	
<input type="checkbox"/>	Trainer				

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TEAM REGISTRATION FORM

Local Association: Saskatoon			Team Name: Vapour		
Level		Age Group - Please check one			Home Color:
<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:

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Afseth	Kali	F	2000	
2		Biever	Jenna	F	200	
3		Chowns	Abby	F	2001	
4		Derkachenko	Taylor	F	2001	
5		Farn	Amanda	F	2000	
6		Gamble	Jade	F	2001	
7		Nilson	Faith	F	2000	
8		Strueby	Greta	F	2001	
9		Trask	Brooklyn	F	2000	
10		Turner	Rachel	F	2001	
11		Weisgerber	Lauren	F	2000	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Trask	Tasha	F	
<input type="checkbox"/>	Asst.Coach	Weisgerber	Keith	M	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Nilson	Ronalda	F	
<input type="checkbox"/>	Trainer	Afseth	Niki	F	

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TEAM REGISTRATION FORM



Local Association: Saskatoon		Team Name: Hurricane	
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		Ethier	Devyn	F	2001	
2		Fink	Paige	F	2001	
3		Hanson	Tori	F	2000	
4		Hondros	Chloe	F	2000	
5		Hupet	Kali	F	2001	
6		Kushniruk	Jadyn	F	2001	
7		Lewis	Cleo	F	2001	
8		Lieffers	Ellie	F	2001	
9		Melnyk	Jadyn	F	2001	
10		Pullock	Shaelynn	F	2000	
11		Zenkewich	Brooklyn	F	2000	
12		Sansom	Madison	F	2001	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Dain	Silas	M	
<input type="checkbox"/>	Asst.Coach	Kushniruk	Russ	M	
<input type="checkbox"/>	Asst. Coach	Hanson	Stacy	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Hondros	Brenda	F	
<input type="checkbox"/>	Trainer				

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TEAM REGISTRATION FORM



Local Association: Saskatoon		Team Name: Shockers	
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		Graf	Taryn	F	2001	
2		Helgason	Taylor	F	2000	
3		Herperger	Julia	F	2000	
4		Hetherington	Peyton	F	2000	
5		Kruger	Madisyn	F	2001	
6		Nordquist	Myah	F	2001	
7		Painchaud	Rachel	F	2000	
8		Postras	Jaiden	F	2001	
9		Steckler	Breann	F	2000	
10		Steen	Brianne	F	2000	
11		Young	Kendall	F	2000	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Steckler	Bill	M	
<input type="checkbox"/>	Asst.Coach	Young	Darren	M	
<input type="checkbox"/>	Asst. Coach	Nordquist	Cindy	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: Saskatoon		Team Name: Ice Shredders	
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		Barilla	Paige	F	2000	
2		Burgess	Jadyn	F	2001	
3		Deg	Desirae	F	2001	
4		Erickson	Sienna	F	2001	
5		Fast	Camryn	F	2001	
6		Keller	Jessica	F	2001	
7		Keller	Taylor	F	2001	
8		Knelson	Raeden	F	2001	
9		Winslow	Danielle	F	2000	
10		Woelke	Alexandra	F	2001	
11		Yanz	Jenna	F	2000	
12		Williamson	Tiya	F	2002	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Yanz	Kelly	F	
<input type="checkbox"/>	Asst.Coach	Burgess	Terry	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Fast	Jennifer	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: Saskatoon		Team Name: Impact	
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:
			Away Color:

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Adair	Kaylee	F	99	
2		Adair	Kelsey	F	99	
3		Byers	Clela	F	99	
4		Davison	Kelly	F	99	
5		Madsen	Kylie	F	99	
6		Penner	Victoria	F	99	
7		Pizzey	Akasia	F	98	
8		Sapieha	Dana	F	99	
9		Semchyshen	Lauren	F	99	
10		Smith	Alex	F	99	
11		Smith	Cassandra	F	98	
12		Sparks	Julianna	F	99	
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TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Richard	Semchyshen	M	
<input type="checkbox"/>	Asst.Coach	Adair	Devin	M	
<input type="checkbox"/>	Asst. Coach	Sparks	Kevin	M	
<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: Saskatoon		Team Name: Fierce	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate
					Y
1		Denesuik	Kelsey	F	98
2		Duret	Kaylyn	F	99
3		Galloway	Chelsea	F	99
4		Grose	Brittany	F	99
5		Kreuzwieser	Kennedy	F	99
6		Lukenoff	Alexandra	F	99
7		Matiko	Sophia	F	99
8		Power	Meghan	F	98
9		Schentag	Cassidy	F	99
10		Schentag	McKenna	F	99
11		Targerson	Kelsey	F	99
12		Targerson	Sydney	F	99
13		Voykin	Arden	F	99
14	AP	Galloway	Kendra	F	2001
15					
16					
17					
18					

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Duane	Galloway	M	
<input type="checkbox"/>	Asst.Coach	Pam	Galloway	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager				
<input type="checkbox"/>	Trainer	Targerson	Jyl	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: Saskatoon		Team Name: Stealers	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Anderson	Carley	F	98	
2		Baetz	Jocelyn	F	99	
3		Gibson	Josie	F	99	
4		Kuntz	Presley	F	99	
5		Lizuck	Hannah	F	99	
6		Lucas	Dana	F	99	
7		Page	Sierra	F	99	
8		Pankiw	Laura	F	99	
9		Rieder	Brynn	F	99	
10		Robles	Renee	F	99	
11		Skutelnik	Sarah	F	99	
12		Tilk	Erin	F	99	
13		Williams	Delynn	F	99	
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Rieder	Barry	M	
<input type="checkbox"/>	Asst.Coach	Lucas	Mike	M	
<input type="checkbox"/>	Asst. Coach	Osatchoff	Christine	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Pankiw	Anita	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: Saskatoon		Team Name: Xtreme	
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: _____
			Away Color: _____

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Cenaiko	Sydney	F	99	
2		Daku	Ashley	F	98	
3		Demchenko	Ellie	F	99	
4		Erickson	Destiny	F	99	
5		Evenson	Karley	F	99	
6		Garand	Alli	F	99	
7		Grover	Rhiannon	F	99	
8		Joyce	Shay	F	99	
9		McCulloch	Brianne	F	99	
10		Murray	Sydney	F	98	
11		Pederson	Kaila	F	98	
12		Sauer	Katie	F	98	
13						
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Rob	Pederson	M	
<input type="checkbox"/>	Asst.Coach	Sather	Amanda	F	
<input type="checkbox"/>	Asst. Coach	McKnight	Kristy	F	
<input type="checkbox"/>	Asst. Coach	Cenaiko	Ken	M	
<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: Saskatoon		Team Name: Saints	
Level <input type="checkbox"/> AA <input checked="" 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 checked="" 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		Adair	Carly	F	98	
2		Bloomquist	Erin	F	98	
3		Bly	Gabrielle	F	98	
4		Boehm	Brooklyn	F	98	
5		Erickson	Kennedy	F	98	
6		Flemming	Ashley	F	99	
7		Gyorfi	Mikayla	F	98	
8		Irvine	Brooklyn	F	98	
9		Kuan	Maija	F	98	
10		Lorenz	Taylor	F	98	
11		Marion	Teagan	F	98	
12		McAdam	Kylah	F	98	
13		Ryan	Madison	F	98	
14		Uhryn	Shayna	F	98	
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	McAdam	Terry	M	
<input type="checkbox"/>	Asst.Coach	Bloomquist	Brock	M	
<input type="checkbox"/>	Asst. Coach	Donahue	Bailey	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: Saskatoon		Team Name: Elite	
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	
					Y	
1		Belyk	Rachelle	F	96	
2		Biletski	Krista	F	97	
3		Goodman	Danielle	F	96	
4		Hondros	Kailee	F	97	
5		Jensen	Jaelene	F	96	
6		Klein	Sarah	F	97	
7		Krzak	Kaitlyn	F	97	
8		Levine	Nicole	F	97	
9		Sparks	Sarah	F	97	
10		Spence	Paige	F	97	
11		Siedel	Jessica	F	96	
12						
13						
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Belyk	Rob	M	
<input type="checkbox"/>	Asst.Coach	Ethier	Carly	F	
<input type="checkbox"/>	Asst. Coach	Jensen	Don	M	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Spence	Jenni	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: Saskatoon		Team Name: Avalanche	
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	
					Y	
1		Craig	Kailey	F	96	
2		Duquette	Shayla	F	96	
3		Fedoruk	Madison	F	97	
4		Fotheringham	Clare	F	96	
5		Fotheringham	Meg	F	96	
6		King	Kaitlyn	F	96	
7		Pankiw	Alycia	F	96	
8		Pottinger	Hannah	F	97	
9		Ryan	Sydney	F	96	
10		Sapieha	Micaela	F	97	
11		Tornato	Shelby	F	98	
12						
13						
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	King	Brenda	F	
<input type="checkbox"/>	Asst.Coach	Duquette	Blair	M	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Fotheringham	Janine	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: Saskatoon		Team Name: Blaze	
Level <input type="checkbox"/> AA <input checked="" 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 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	
					Y	
1		Bridges	Taylor	F	97	
2		Chrun	Mackenzie	F	96	
3		Hetherington	Rachel	F	96	
4		Janzen	Heather	F	96	
5		Kretzer	Haley	F	96	
6		Pearson	Madison	F	96	
7		Pullock	Chantelle	F	96	
8		Stalker	Sabrina	F	97	
9		Stupak	Caitlyn	F	97	
10		Waldner	Danielle	F	96	
11		Wallin	Kirsten	F	96	
12		Wiebe	Jessica	F	97	
13		Rupps	Ashlyn	F	96	
14		Goldstein	Kyle	M	97	
15	AP	King	Kaitlyn	F	96	
16	AP	Tornato	Shelby	F	98	
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Schell	Courtney	F	
<input type="checkbox"/>	Asst.Coach	McTavish	Amy	F	
<input type="checkbox"/>	Asst. Coach	Hetherington	Mark	M	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Hunchak	Cara	F	
<input type="checkbox"/>	Trainer	Lux	Molly	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: Saskatoon		Team Name: Boom	
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 type="checkbox"/> U16 <input checked="" 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		Doepker	Justin	M	93	
2		Hopper	Lindsey	F	94	
3		Horne	Nikki	F	95	
4		Kopp	Torie	F	94	
5		Larson	Allison	F	95	
6		Neveu	Brooklyn	F	95	
7		Skopyk	Breanna	F	95	
8		Stoecklein	Heidi	F	93	
9		Tirk	Dakota	F	95	
10		Turanich	Vanessa	F	93	
11		Wicks	Chelsea	F	93	
12		Treen	Cidne	F	93	
13						
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Turanich	John	M	
<input type="checkbox"/>	Asst.Coach	Skopyk	Dawn	F	
<input type="checkbox"/>	Asst. Coach	Skopyk	Donna	f	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Wicks	Shauna	F	
<input type="checkbox"/>	Trainer	Stoecklein	Mark	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: Saskatoon		Team Name: Ice	
Level <input type="checkbox"/> AA <input checked="" type="checkbox"/> A <input type="checkbox"/> B	Age Group - Please check one		Home Color:
	<input type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U14 <input type="checkbox"/> U16 <input checked="" type="checkbox"/> U19 <input type="checkbox"/> 18+ <input type="checkbox"/> 30+		Away Color:

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Barrett	Jayne	F	95	
2		Bowman	Jessica	F	95	
3		Britz	Erin	F	93	
4		Cenaiko	Shannon	F	93	
5		DeDekker	Madison	F	93	
6		Eastman	Nicole	F	93	
7		Klemp	Jordan	F	93	
8		Livingstone	Ashtyn	F	93	
9		Obrigewitsch	Alex	F	94	
10		Richels	Brittnee	F	93	
11		Steinbach	Brooklyn	F	95	
12		Temple	Hannah	F	93	
13		Walker	Brittany	F	96	
14						
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Reynolds	Jill	F	
<input type="checkbox"/>	Asst. Coach	Hart	Melissa	F	
<input type="checkbox"/>	Asst. Coach	Saleski	Tarren	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Eastman	Mary-Lou	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: Saskatoon			Team Name: Chargers		
Level		Age Group - Please check one			Home Color:
<input type="checkbox"/> AA	<input type="checkbox"/> A	<input type="checkbox"/> B	<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+	
					Away Color:

Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
				Y	
1	Begon	Jaycelyn	F	82	
2	Brown	Shardelle	F	73	
3	Dmytriv	Kayla	F	88	
4	Ferguson	Marci	F	76	
5	Flodell	Tanya	F	78	
6	Ford	Cassandra	F	90	
7	Galloway	Suz	F	72	
8	Georget	Nicole	F	89	
9	Hay	Kristin	F	72	
10	Hellquist	Sean	M	90	
11	Kerpan	Bonnie	F	63	
12	Klemecki	Loni	F	78	
13	Kutney	Karen	F	80	
14	Pardy	Melissa	F	78	
15	Pettapiece	Stacey	F	75	
16	Sideroff	Lani	F	77	
17					
18	West	Nicole	F	72	
19	Wist	Karista	F	77	
20	Wolfe	BJ	F	74	

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Ford	Anne	F	
<input type="checkbox"/>	Asst.Coach	Burgess	Terry	F	
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Gordon	Deanna	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: Saskatoon		Team Name: Blues	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Braun	Jennie	F	85	
2		Connell	Mandy	F	85	
3		Dupont	Bre	F	84	
4		Ens	Terri	F	85	
5		Kies	Deborah	F	73	
6		Napper	Lindsey	F	87	
7		Ring	Aliya	F	83	
8		Skopyk	Dawn	F	85	
9		Smith	Brittany	F	89	
10		Vogt	Christine	F	87	
11		Wist	Jennifer	F	87	
12		Boyenko	Jade	F	82	
13		McNutt	Barb	F	70	
14		Tran	Whitney	F	92	
15						
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Napper	Ted		
<input type="checkbox"/>	Asst.Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Hunchak	Cara		
<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: Saskatoon		Team Name: Straight Shooters	
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:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate
					Y
1		Belyk	Rob	M	63
2		Bray	Andrew	M	83
3		Glow	Kelly	M	81
4		Glow	Shaylan	F	89
5		Kovich	Keagan	F	89
6		MacSorley	Gord	M	81
7		Norton-Byers	Kody	M	
8		Outhwaite	Bill	M	78
9		Pederson	Amy	M	91
10		Pederson	Rob	F	79
11		Redman	Hoyt	M	88
12		Schille	Adam	M	84
13		Simkins	Cameron	M	88
14					
15					
16					
17					
18					

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach				
<input type="checkbox"/>	Asst.Coach				
<input type="checkbox"/>	Asst. Coach				
<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: Saskatoon		Team Name: Smash	
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 type="checkbox"/> U16 <input type="checkbox"/> U19 <input checked="" type="checkbox"/> 18+ <input type="checkbox"/> 30+	
		Home Color:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Cenaiko	Jackie	F	91	
2		Driedger	Marissa	F	91	
3		Gartner	Molly	F	91	
4		Hopper	Lauren	F	90	
5		Kopp	Talyssa	F	91	
6		Maduck	Gabrielle	F	92	
7		Morgan	Katelyn	F	84	
8		Pizzuto	Allison	F	92	
9		Pizzuto	Samantha	F	90	
10		Pizzuto	Sarah	F	87	
11		Prochera	Shondra	F	84	
12		Reynolds	Jill	F	87	
13		Saleski	Tarren	F	87	
14		Soron	Jennifer	F	91	
15		Chamberlain	Tammi	F	85	
16		Uhryn	Brianne	F	92	
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Cenaiko	Ken	M	
<input type="checkbox"/>	Asst.Coach	Chamberlain	Gerry	M	
<input type="checkbox"/>	Asst. Coach				
<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: Saskatoon		Team Name: Shock	
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 type="checkbox"/> U16 <input type="checkbox"/> U19 <input checked="" type="checkbox"/> 18+ <input type="checkbox"/> 30+	
		Home Color:	
		Away Color:	

	Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
					Y	
1		Braun	Nicole	F	87	
2		Dogniez	Leslie	F	92	
3		Elmgren	Charmaine	F	87	
4		Holm	Michelle	F	73	
5		Kaminski	Tatianna	F		
6		Kuntz	Renee	F	67	
7		Leier	Brittany	F	89	
8		McKnight	Kristy	F	83	
9		Norton-Byers	Kristina	F	86	
10		Norton-Byers	Chantelle	F	89	
11		Purcell	Erin	F	79	
12		Sather	Amanda	F	84	
13		Wilson	Jodi	F	81	
14		Yuzicapi	Pam	F	90	
15		Hart	Melissa	F	79	
16						
17						
18						

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Byers	Kirk	M	
<input type="checkbox"/>	Asst.Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Asst. Coach				
<input type="checkbox"/>	Manager	Dogniez	Myrna	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: Saskatoon

Team Name: Wild

Level <input checked="" 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: Away Color:
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Uniform #	Player's Surname	Given Name	Sex M/F	Birthdate	
				Y	
1	Anderchek	Amanda	F	91	
2	Beattie	Erin	F	78	
3	Beattie	Sjanne	F	84	
4	Brown	Kim	F	81	
5	Coxford	Kyla	F	91	
6	Cumpstone	Erin	F	78	
7	Dogniez	Jamie	F	89	
8	Gropp	Samantha	F	91	
9	Livingstone	Torri	F	90	
10	Mitchell	Kelsey	F	89	
11	Moilanen	Janika	F	90	
12	Mountford	Deejai	F	88	
13	Rhodes	Karlee	F	91	
14	Ritchie	Michelle	F	90	
15	Schell	Courtney	F	84	
16	Seitz	Alicia	F	91	
17					
18					

TEAM STAFF					
	List max. of 5	Surname	Given Name	M/F	Certification *
<input type="checkbox"/>	Coach	Andreen	Dwayne	M	
<input type="checkbox"/>	Asst.Coach	McAdam	Terry	M	
<input type="checkbox"/>	Asst. Coach	Mitchell	Gord	M	
<input type="checkbox"/>	Asst. Coach	Ritchie	Tim	M	
<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)