

WNY Roller Hockey League 2012 WNY Roller Hockey OFFICIAL TEAM ENTRY FORM

*** KENAN CENTER ***

Sept. 16th - Fall 12 Session Begins

TEAM'S FULL N	AME:			····	
Adult Division: Co	pper & Over (no	Bronze ew)	Silver	Gold	
Contact's NAME:					
HOME PHONE:		CELL PHONE:			
EMAIL (mandatory)):				
EMAIL (mandatory) Did your team play i	n <mark>our Hou</mark>	se League i	n 2011?		
Office Use Only:					
Down Payment (min. \$10	00):				
Jersey Order: (\$80		per set while supplies last)			
Jersey Number (amount)					
Jersey Color (request):					
* \$100 Late Fee Strictly		registration i	s accepted after	September 7th, 2012	
Please make checks paya	ble to:	3806 Union	Rd #109 J	ason Cell – 716-444-2667	

Cheektowaga, NY 14225

You may Fax Registration Form

Eric Cell – 716-903-2658

FAX # - 716-634-6714

WNY Roller Hockey