



WNY Roller Hockey League 2015 WNY Roller Hockey OFFICIAL TEAM ENTRY FORM

***** KENAN CENTER *****

Sept. 20th - Fall 15 Session Begins

TEAM'S FULL NAME: _____

Adult Division: Copper ____ Bronze ____ Silver ____ Aluminum ____
Iron ____ 30 & Over (new) ____ **DAY:** _____

Contact's NAME: _____

HOME PHONE: _____ **CELL PHONE:** _____

EMAIL (mandatory): _____

Did your team play in our House League in 2012? _____

Office Use Only:

Down Payment (min. \$100): _____ cash<> check<> credit _____ exp. _____

Jersey Order: _____ (\$125per set while supplies last)

Jersey Number (amount): _____

Jersey Color (request): _____

*** \$100 Late Fee Strictly Enforced if registration is accepted after September 14th, 2015**

Please Mail Registration form to -
WNY Roller Hockey #109
3843 Union Road Ste 15
Cheektowaga, NY 14225-4284

Please Fax Registration form to -716-634-6714
Please Email Registration form to - Eric@wnyrh.com
Contact Eric Haak—716-903-2658
OR Jason Flowers—716-444-2667 with questions