



Specialty Camps 2012 Goaltending College Camp Registration

Calgary Hockey Development
1729 12 Street SW
Calgary Alberta T2T 3N1
T 403-777-3646 F 403-777-4550

TO REGISTER: Please fill in the required information, including credit card details, and fax to Calgary Hockey Development at 403-777-4550, or scan and email to info@calgaryhockeydevelopment.com

CAMP CONFIRMATION: Registration is on a first-come, first-served basis and is not confirmed until payment has been processed. You will receive an e-mail confirmation once payment has been processed.

REFUND POLICY:

1. Registration fees will be refunded (less a \$45 cancellation fee) for cancellations received in writing on or before June 1, 2012. Requests must be sent by email to: info@calgaryhockeydevelopment.com
2. Registration fees cannot be transferred to the following year
3. No refunds for cancellations will be issued after June 1, 2012 without a doctor's certificate. Notice must be provided via email to: info@calgaryhockeydevelopment.com

For more information please call Calgary Hockey Development at 403-777-3646 or visit www.calgaryhockeydevelopment.com

Program Information Please be sure to register for the correct camp based on date of birth and team played on in the 2011/12 season. Calgary Hockey Development reserves the right to remove a registrant from a camp or move a registrant to the appropriate level of camp.

Atom Goalie College - \$265.00 (includes GST)

(For players born 2002/03 who played Novice Division 1-3 in the 2011/12 season)

Aug 27-31 **5:30pm-6:30pm** **Southland Leisure Centre**

Pee wee Goalie College - \$265.00 (includes GST)

(For players born in 2000/01 who played Atom Division 1-5 or Pee wee Division 1-6 in the 2011/12 season)

Aug 27-31 **6:45pm-7:45pm** **Southland Leisure Centre**

Registration Information

Participant's Name _____

Address _____

City _____ Province _____ Postal Code _____

Mom _____ Cell # _____ Bus # _____

Dad _____ Cell # _____ Bus # _____

Birthdate (mm/dd/yyyy) _____ Division # or Level Played _____

Team last played on _____ Position played _____

Special Medical Conditions or Allergies _____

Emergency Contact Name & Number While Camp is in Progress _____

Email for payment receipt and confirmation _____

Payment Information

Credit Card Type Visa MasterCard

Name on Card _____ Card Number _____

3 Digit Code on Back _____ Expiry Date _____

Signature _____

Credit card information will be destroyed once payment has been processed