**\*\* Please re-save this document as your Team/School name before sending it to** **edferns@sympatico.ca****! Thank you ☺**

SCHOOL GIRLS FESTIVAL 2018

|  |  |
| --- | --- |
| Team/School Name: |  |
|  |
| Team/School Contact Name(s): |  |
|  |
| Main Contact’s Email: |  | Main Contact’s Phone #: |  |
|  |
| Date(s) of Competition:Mark with a “Y” beside requested date(s) | Monday September 17@ Iceland | X | Tuesday September 25@ Sunnybrook Park |  | Thursday September 27@ Sunnybrook Park |  |
|  |
| …Player Information… |
|  |
|  | Name: | Jersey Number: | Grade: |
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| 20. |  |  |  |

In addition to sending this completed form, please do not forget to send your cheque of

**$350** per specified day made out to **GOA Reds FHC** to the following address:

4308 Rockwood Road, Mississauga, Ontario – L4W 1L8

\* This registration form and cheque secures your spot for the specified day(s).