

**Midwest Hockey
Senior Men's League
Single Player Registration form**

Name: _____

Address: _____

City: _____ **St.:** _____ **Zip:** _____

Phone (h) _____ **(w/c)** _____

E-Mail _____

I am over the age of 18 (Please circle correct answer) YES NO

I, The undersigned assure that the above information is correct and guarantee to abide by all league rules, policies, decisions, and payment schedules.

Player Signature: _____ **Date:** _____

Amount Paid: _____ **Date:** _____