

**SOUTH SHORE DYNAMO'S TRYOUT REGISTRATION FORM**

**(PRE REGISTRATION OF \$50.00 MUST ACCOMPANY APPLICATION AND BE RECEIVED BY 3/10/2010 FOR ALL LEVELS (ALL FEES ARE NON-REFUNDABLE)  
REGISTRATION AT THE DOOR IS \$60.00**

**HOME TOWN PROGRAM** \_\_\_\_\_

**LAST NAME** \_\_\_\_\_ **FIRST NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TOWN** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_

**DATE OF BIRTH** \_\_\_\_\_

**TEAM/LEVEL YOU ARE TRYING OUT FOR** \_\_\_\_\_

**PREFERRED POSTION** \_\_\_\_\_ **SHOOTS L/R** \_\_\_\_\_

**I AM FULLY AWARE THAT THE ABOVE NAMED PLAYER WILL BE PARTICIPATION IN A TRYOUT, INVOLVING CONTAC, IN A SPORT, HOCKEY, IN WHICH INJURY IS POSSIBLE. I AM FULLY AWARE THAT THE ABOVE NAMED PLAYER, UPON BEING CHOSEN FOR A SELECT TEAM AND A PAID DEPOSIT IS RECEIVED, MAY NOT PLAY FOR ANOTHER SELECT TEAM. HOWEVER, IF THE PLAYER IS NOT CHOSEN AFTER TRYOUTS, HE OR SHE MAY TRYOUT FOR ANOTHER SELECT TEAM.**

**SIGNATURE: (PARENT OR GUARDIAN)** \_\_\_\_\_

**MITES THRU BANTAM MINOR MAIL TO: JOANNE FERERICO, 1 WESTLEA TERRACE, BROCKTON, MA 02301**

**BANTAM MAJOR THRU MIDGETS MAIL TO: BURT HERMAN, 21 PLYLLIS DRIVE, RANDOLPH, MA 02368**