

South Shore Conference
Dynamo Elite 2020-21
Tryout application and fee

PLEASE CHECK LEVEL TRYING OUT FOR :

MITE (2012) _____ Squirt Minor (2011) _____
Squirt Major (2010) _____ Pee wee Minor (2009) _____
Pee wee Major (2008) _____

Player's Name (print) _____

Address: _____

Contact email _____

Contact cell # _____

Position trying out for: _____

Current team/teams _____

USA Hockey registration # _____

HOME TOWN PROGRAM _____

TRYOUT FEE IS \$50.00 IN ADVANCE (\$65.00 AT THE DOOR)

Please make out check payable to South Shore Conference Dynamo Elite and mail to:

South Shore Conference
100 Maplewood Circle, Brockton, Ma. 02302
(include application)

I hereby acknowledge that my son/daughter named above will be a member of their home town program in good standing mentioned above for the 2019-20 season . I hereby authorize my son/daughter being in good health and capable of participating in these tryouts. Tryout fees are non refundable.

_____ date: _____

Parent signature

