



## **2023 Spruce Kings Northern Futures** Application Form – August 26 -28, 2023

Student:	Date of birth:			
Mailing Address:				
City:	Provi	nce/State:	Postal/Zip Code:	
Phone #: ()	Email address:			_
Date of Birth:	Height:	Weight:	Shoots (L/R)	_
Position:	Parents Names:			_
Last School Attended:			_ Avg. Mark (GPA):	
Last Team Played For:				
Please complete and return	ו this form to" <u>prospectsca</u>	mp@sprucekings.bc.ca		
	Total Amount of \$299	is owing at time of registra	tion	
	Method of Payment:	Mastercard Visa Ch	eque	
(Cheque or credit card -	- make cheques payable	e to "Prince George Spru	ıce Kings")	
(*Cash must be done in	person at Spruce Kings	s office)		
Amount to be billed to c	credit card:			
Credit Card Type (Pleas	e check one): Visa	Mastercard		
Card #		Validation Code #	Expiry	_
Name on card				
Card Holder Signature_				
□ By submitting this form indicated above.	ı, I hereby give the Spruce	Kings authorization to deb	it my credit card by the amount	

The applicant and the parent/guardian agree to hold harmless the Prince George Spruce Kings Junior "A" Hockey Club, the City of Prince George, and the Spruce Kings Spring Break Camp and any/or any person associated with this even from any claims or damages resulting from any accident or loss however it may be caused. Applicant will not be selected unless this waiver is signed prior to the start of each selected session. If submitting registration online, a signature will be required prior to the start of selected session.

My signature below signifies that I have read and understand this waiver.

Signature of Parent or Guardian: \_\_\_\_\_\_ Date: \_\_\_\_\_\_