



Kiwanis Pond Hockey Registration Form

TEAM NAME: _____

TEAM CAPTAIN: _____

TEAM PARTICIPANTS:

Name _____ Age _____

Email _____ Cell# _____

Name _____ Age _____

Email _____ Cell# _____

Name _____ Age _____

Email _____ Cell# _____

Name _____ Age _____

Email _____ Cell# _____

Name _____ Age _____

Email _____ Cell# _____

Registration Fee: \$350 per team

Mail in Registration Form and Payment to:

**Kiwanis Foundation Lake Bluff/Lake Forest
P.O. Box 34, Lake Bluff, IL 60044**

