

# **Delegation Registration**

				POLY	HOCKE	Y						
Dele	gation Name											
Head	d of Delegation											
Addr	ress											
	City						State		Z	ZIP		
Phor	ne											
Ema	nil											
List	all coaches, partne	rs and chaper the ROIE and								n. Ple	ase ir	ndicate
Name	9		HOD	СОАСН	OFFICIAL	CHAP	РН-Т	IS	С			
1												
2												
3												
4												

### **Delegation Registration Continued...**

Name	HOD	СОАСН	CHAP	РН-Т	ISC		
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17							
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45					



#### **Poly Hockey Delegation Statistics**

Delegation:									
General Information:									
Total Number of Athletes:		0							
Total Number of Coaches:		0							
Total Number of Officials:		0							
Total Number of Chaperons	: <u> </u>	0							
Head of Delegation (HOD)		0							
Total Delegation:  (This number will determine the total number of meal tickets and t-shirts allotted for your team.)									
Sport Information:									
Total number of athletes cor	mpeting in:								
Number of Teams: Team Ability Levels: (A,B or									
Number of ISC	): 								
Meals:									
List the total number of mea	-	·	· · · · · · · · · · · · · · · · · · ·	meal tickets.					
Friday, March 1, 2024	Dinner	Total Attendin	g Dinner						
Saturay, March 2, 2024	Lunch	Total Attendin	ng Lunch						
Saturay, March 2, 2024	Dinner	Total Attendin	g Dinner						
Extra Meal Tickets: NONREFUNDABLE									
List the number of extra meal tickets you anticipate needing during the duration of the Games.									
Total tickets requested:	. 0	at \$25.00 each	Total Amount Due:	\$0.00					

Note: We will not be accepting cash or checks during the Games. If you find that you need to purchase extra tickets while you are at the Games, you must collect the funds and deposit them into your account with a Revenue Submittal Form.



## **Team Registration Form - Poly Hockey**

Delegation:	Team Number			Lev	rel	
Name	DOB	Jersey #	Positio	on	М	F
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2.						
3.						
4.						
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7.						
8.						
9.						
10.						
11.						
12.						
Head Coach:						
Official:		-	-			

Delegation:		Team Number		Le	Level		
	Name	DOB	Jersey #	Position	М	F	
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2.							
3.							
4.							
5.							
6.							
6. 7.							
8.							
9.							
10.							
11.							
12.							
Head Coach:							
Official:							



# **Team Registration Form - Poly Hockey**

Delegation:		Team Number		L	evel	
	Name	DOB	Jersey #	Position	М	F
1.						
2.						
2. 3.						
4.						
5.						
5. 6. 7.						
7.						
8.						
9.						
10.						
11.						
12.						
Head Coach:						
Official:						

Delegation:		Team Number			Le	vel	
	Name	DOB	Jersey #	Positio	on	М	F
1.							
2.							
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11.							
12.							
Head Coach:		•	•				

Official:	



# Poly Hockey ISC Entry Form

Delegation:									
Name	DOB	Gender	Shoot	Pass	Stick	Accuracy	Final Score		
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