

Hastings Raiders S.T.P. Sign-up

Player(s) Name: _____

Upcoming Season Level: _____

Address: _____

City: _____

Parent(s) name(s): _____

Parent(s) Phone: _____

Emergency Contact: _____

Emergency Phone: _____

Email Address: _____

**Please make checks payable to:
Hastings Boys Hockey Club**

Please send checks to:
Adam Welch
1665 Tierney Drive
Hastings 55033

If you have any questions please contact:
Adam Welch
E-mail: awelch@hastings.k12.mn.us

***Sign Up Form and Payment due by Monday May 20th ***

-Any sign up received after May 20th will be \$400.00

-Player will not participate if payment is not received by first day of camp.