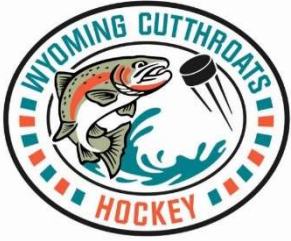


# Wyoming Cutthroats 2022-2023

## Travel Team Registration Form



Player Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

2022-2023 USA Hockey Number: \_\_\_\_\_

Home WAHL/other Association: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Phone Number: \_\_\_\_\_ cell.

Email: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Phone Number: \_\_\_\_\_ cell.

Email: \_\_\_\_\_

Team Trying Out For:      U10      U12      U14      U16

Primary Position:      Forward      Defense      Goalie

Secondary Position:      Forward      Defense

*(only select a Secondary Position if your player would be willing to play that position for the season)*

Would You be Willing to Play on a Secondary (B) Team if So Selected: Yes No

Preferred Jersey Number (top 3 choices): \_\_\_\_\_

*(Returning players will have jersey number preference, followed by second year players)*

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This section to be filled out by team personnel:

\$40 Tryout registration fee collected: \_\_\_\_\_

\$250 deposit collected: \_\_\_\_\_ (if player is selected)

Team the player has been selected to participate on: \_\_\_\_\_

Payment Method – Venmo    PayPal    Credit    Check    Cash

Credit Card information if paying by card:

Amount: \_\_\_\_\_

Card type and number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ ZIP \_\_\_\_\_ CCV #: \_\_\_\_\_