



WALLED LAKE NORTHERN HIGH SCHOOL BOYS VARSITY ICE HOCKEY

PROSPECT PLAYER INFORMATION

Date: _____

Full Legal Name: _____ D.O.B: _____

Graduation Yr: _____ GPA: _____ (Last Report Card) Ht: _____ Wt: _____

Address: _____ City: _____ Zip: _____

Hm Ph: _____ Cell Ph: _____ Email: _____

Last Year's Team: _____ House ____ Travel ____ JV ____ Varsity ____ Other _____

Last Year's Coach: _____ Position(s) Played: _____ Shoots: Left | Right

Other Sports Playing: _____

PARENT INFORMATION

Name	Lives With (yes/no)	Cell	Email

Please email completed form to President@WLNHockey.org

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