



QUEST
HOCKEY

4 ON 4 SUMMER LEAGUE
TEAM REGISTRATION FORM

Team Name _____

Rookie ['02 – '05] * Veteran ['00 – '02] All-Star ['97 – '00]

* '05's must have played at least 1 year of ADM cross-ice to be eligible

Team Manager Name _____

Address _____

City/State/Zip Code _____

Phone _____ Email _____

TEAM FEE: \$2300

A **COMPLETED TEAM REGISTRATION FORM** & **NON-REFUNDABLE DEPOSIT OF \$600** is required to register your team. Both must be received by **Friday, April 12, 2013**.***

*** **EARLY REGISTRATION DISCOUNT**: Save **\$200** on your team fee if received by **Friday, February 1, 2013**

Team managers will receive a follow-up email once your team registration form is received.

Each team's final roster & remaining balance are due by **Friday, April 26, 2013**.

Make checks payable to "Quest Hockey" and mail completed team registration form and deposit to:

Quest Hockey
1230 Wisconsin Ave
Pittsburgh, PA 15216

QUESTHOCKEY.COM