



MIDNIGHT HOCKEY REGISTRATION FORM

Please print and fax to: 631-239-6037

or mail with Payment to:

MHL, PO Box 723, East Northport, NY 11731-1204

Name: _____ D.O.B.: _____

Street Adress: _____ Apt.#: _____

Town: _____ Zip: _____

Home Phone: _____ Cell: _____

Email: _____

LEAGUES

Back from College

9 games: \$3,675 team / \$275 individual _____ Elite _____ C/D

OVER-40

8 games: \$3,400 team / \$255 individual _____ C/D _____ E

Islandwide

8 games: \$3,400 team / \$255 individual _____ B _____ C _____ D _____ E _____ 30 & OVER D/E

Midweek Prime

10 games: \$4,450 team / \$325 individual _____ D/E

Iceland 25+, 30+ and B/C

10 games: \$4,150 team / \$315 individual _____ 25 & over _____ 30 & over _____ B/C

Weekday FD/PD - STARTS SEPT. 2010

10 games: \$2,350 team / \$210 individual _____ D/E

Nassau or Suffolk or Both: _____ Nassau _____ Suffolk _____ Both Nassau and Suffolk

PAYMENT

Method of Payment: _____ Check _____ Money order _____ Credit card
_____ Visa _____ Master Card _____ Amex

Name _____ Exp date _____

Name On Card _____ Amount _____

Credit Card Number _____

Signature _____

Note: Payment must include \$22 liability insurance fee.