



Player Information:

Full Name: _____

Address: _____

City, State, Zip: _____

Team Age: U10 U11 U12 U13 U14 U15 U16 U18

Gender: Male Female

Phone Number: _____

*Date of Birth: _____

**Jersey #: _____

Parent Information:

Mother's Name: _____

Father's Name: _____

Cell Phone: Mother _____

Father _____

Email Address: Mother _____

Father _____

Parent Signature: _____

**If you are a new player with the Salem Sabres, you must provide a copy of your child's birth certificate.*

*** Jersey numbers will be given to new players.*