

Registration Forms

Player #1 Name & Age: _____

Email of player or parent: _____

Player #2 Name & Age: _____

Email of player or parent: _____

Player #3 Name & Age: _____

Email of player or parent: _____

Player #4 Name & Age: _____

Player #5 Name & Age: _____

Player #6 Name & Age: _____

This form must be signed by a parent or guardian

Email of player or parent: _____

Signature of parent or guardian: _____

By signing this registration form you are giving permission to you child to compete in this fun tournament. Please download and fill out injury waivers on our website.

For info call 613-794-2464 or visit www.kanatasouth.com

Please also fill out liability wavier and submit for each child upon submission of registration forms.