

## Registration

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

### Emergency Phone Contact

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Camp Code: \_\_\_\_\_

## Jersey Size

Jerseys issued only to players enrolled in the Quincy Weeklong Camps.

Youth  Sm.  Med.  Lg.  XLg.

Adult  Sm.  Med.  Lg.  XLg.

A 50% non-refundable deposit is due with Registration Form in order to reserve a spot in Camp. Applications will be processed on a first come, first serve basis. No refunds given to any player who leaves the Camp, misses the Camp, or is expelled for any reason.

## Checks payable to:

O'Sullivan Hockey  
55 Crockett Ave.  
Boston, MA 02124

Phone: 617.288.4644

Email: [Stephanie@osullivanhockey.com](mailto:Stephanie@osullivanhockey.com)

## World Class Hockey Instruction From World Class Players



## School Locations

★ Pilgrim Arena, Hingham

★ Quincy Youth Arena

**WWW.OSULLIVANHOCKEY.COM**  
Register online or call 617.288.4644