

WNY Roller Hockey League (Buffalo Wings)

2012 WNY Roller Hockey OFFICIAL TEAM ENTRY FORM

*** KENAN CENTER ***

Jan. 30th - Spring 12 Session Begins (Kenan Center)

TEAM'S FULL NAME: _____

Youth Division: 12U ____ 14U ____ 16U ____ 18U____

Adult Division: Copper ____ Bronze ____ Silver ____ Gold ____

Iron _____ 35 & Over (new) _____ **DAY:** _____

Contact's NAME: _____

HOME PHONE: _____ **CELL PHONE:** _____

EMAIL (mandatory): _____

Did your team play in our House League in 2011? _____

Office Use Only:

Down Payment (min. $50): _____

Jersey Order: _____

Jersey Number (amount): _____

Jersey Color (request): _____

Please make checks payable to: **WNY Roller Hockey**

3806 Union Rd #109
Cheektowaga, NY 14225

You may Fax Registration Form

Jason Cell – 716-444-2667

Eric Cell – 716-903-2658

FAX # - 716-634-6714