

2019 MJCT Team Registration

Division: Junior Men _____ Junior Women _____

SKIP: _____ Age: _____

Address: _____

Phone: _____ Email: _____ Birthdate: _____

THIRD: _____ Age: _____

Address: _____

Phone: _____ Email: _____ Birthdate: _____

SECOND: _____ Age: _____

Address: _____

Phone: _____ Email: _____ Birthdate: _____

LEAD: _____ Age: _____

Address: _____

Phone: _____ Email: _____ Birthdate: _____

FIFTH: _____ Age: _____

Address: _____

Phone: _____ Email: _____ Birthdate: _____

COACH/CONTACT PERSON: _____

Phone: _____

Email Address: _____

Cost is \$20 / team. Cheques payable to MJCT

Mail entry to:
Karen Letham
112 Fulton Street
Winnipeg, MB
R2N 4C1