

EXCELLENCE ON ICE | *Registration Form*



Excellence On Ice registration **MUST** include:

- A complete staff list
- Copies of liability insurance certificates only of staff members who ARE NOT insured through the PSA

Name of Applicant Organization/Facility _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____ WebSite _____

Facility Manager _____

Skating Director _____

Club President _____

Which of the above people will serve as the main contact/recipient of EOI information? _____

Address of main contact, if different from above _____

City _____ State _____ Zip _____

FOR OFFICE USE ONLY	
Rec'd	_____
Shield Sent	_____

