

# 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 \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>	
Rec'd	_____
Shield Sent	_____

