

S.C.O.R.E.



Skaters Committed to Outreach, Responsibility, and Education

Participation Form Deadline: February 1, 2012

2011-2012 Team Level: _____

Skaters Name: _____

Grade in School: _____

Address _____

Phone Number (_____) _____ - _____

Community Service Participation

Date: _____

Name of Event: _____

Parent/Guardian Signature(s): _____

Return with copy of report card (please white out teacher comments) to:

David Sikes
448 9th Ave N
Sauk Rapids, MN 56379

or:

Sauk Rapids Youth Hockey Association
Attn: David Sikes
PO Box 244
Sauk Rapids, MN 56379

GPA (For SCORE Coordinator to complete):