



2010 Women's Hockey Alumnae Weekend Registration Form
The Annual Women's Hockey Reunion at Colgate

NAME _____ CLASS _____

ADDRESS _____

PHONE _____ EMAIL _____

There will be _____ adults and _____ children in my party for a total of _____.

Attendees:

Three horizontal lines for listing attendees.

Please check all events that you plan to attend:

Friday

- Game vs. Princeton 7:00 p.m.
Post-Game Reception at Seven Oaks Clubhouse 9:30 p.m.

Saturday

- Breakfast 8:30 a.m.
Family Skate 9:00 a.m.
Alumnae Game 9:30 a.m.
I would like to participate in a careers discussion with current players 11:00 a.m.
Center Ice Club Meeting: Purpose & Direction 12:30 p.m. (lunch provided)
Game vs. Quinnipiac 4:00 p.m.
Center Ice Club Dinner 7:30 p.m. (Cocktails start at 7:00pm)

Yes, I would like to arrange a carpool with other alumnae in my area.

**Weekend Price:
\$60 per person
\$25 for children 12 and under
Saturday Dinner Only: \$25 per person

Enclosed is my check for \$_____.

Please make your checks out to "Colgate Women's Hockey" and return them along with your registration sheet to:

Scott Wiley, Women's Hockey Office, 13 Oak Drive, Hamilton, NY 13346 or fax to 315-228-7925

Return this form in the envelope provided by January 20, 2010.

Thank you for your continued support of women's hockey and we look forward to seeing you soon!