



**Norwood District High School**  
**Hockey Canada Skills Academy**  
**Application Form**

**Please fill out entire application.**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Current School/Grade:** \_\_\_\_\_  
\_\_\_\_\_

**Current Hockey Team:** \_\_\_\_\_

**Parent/Guardian Information:**

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Address :** \_\_\_\_\_  
**(if different)**  
\_\_\_\_\_  
\_\_\_\_\_

**Phone (H):** \_\_\_\_\_

**(B):** \_\_\_\_\_

**Please answer the following questions:**

**1. Why would you like to be accepted into the NDHS Hockey Skills Academy?**

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**2. What are two strengths and one area you need to work on as a hockey player?**

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**3. What hobbies and interests do you have?**

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**When completed, please mail the application form to the following address by Fri. Dec. 17th, 2010:**

**Norwood District High School  
Hockey Canada Skills Academy  
c/o Brian Hayton  
P.O. Box 70, 44 Elm St.  
Norwood, ON  
K0L 2V0**