



## *Syracuse Stars Junior Program*

### **PLAYER SECTION**

Player Name: \_\_\_\_\_ Citizenship: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Shoots (L or R): \_\_\_\_\_ Position (F, D, or G): \_\_\_\_\_

Player D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_ High School: \_\_\_\_\_ GPA: \_\_\_\_\_ SAT/ACT: \_\_\_\_ / \_\_\_\_

Last Season's team:

Last Season's stats: GP    Goals    Assist    PIM    \*\*Goalies: GP\_\_\_\_ GAA\_\_\_\_ SP%\_\_\_\_ Assists\_\_\_\_

List three strengths you have as a player:

- 1.
- 2.
- 3.

List three weaknesses you have as a player:

- 1.
- 2.
- 3.

How would you describe yourself as a player (i.e. power forward, goal scorer, stay at home defenseman)?

What do you bring to the Syracuse Stars as a player and citizen?

What are some accomplishments you have had as a player?

Special School Achievements:

Hockey Background:

If your goal is to play college hockey have you already considered any schools? If so list them:

**PARENT SECTION**

Parent(s) Names: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Cell Phone 1: \_\_\_\_\_ Cell Phone 2: \_\_\_\_\_

References:

Please include hockey references as well as personal references.

1 Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship \_\_\_\_\_

2. Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship \_\_\_\_\_

Mail or Fax Application to:  
Syracuse Stars Junior Hockey Club  
5679 Thompson Road  
Dewitt, NY 13214  
Fax: 315-446-7363