



Carstairs Bruins U7 Season Goal Sheet

Player's Name: _____

Parent(s) Name: _____

Number Player would like to wear this Season Choice #1 _____ Choice #2 _____ Choice #3 _____

How many years have you been playing hockey? _____

This is my First _____ Second Year _____ in U7 (previously know as Tyke)

Player's Question:

What are 3 Goals I would like to achieve this season?

Parents Question:

What are 3 Goals I would like to see my Child achieve this season?

Is there anything that we, as coaches, need to be aware of that will help support your child this hockey season?
