

# PLAYER SPOTLIGHT

## List your Favorites

**Sport:** \_\_\_\_\_

**Food:** \_\_\_\_\_

**NHL Player:** \_\_\_\_\_

**Color:** \_\_\_\_\_

**Song:** \_\_\_\_\_

**Movie:** \_\_\_\_\_

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

## Other Interesting Facts about you:

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# ATOM

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

\_\_\_\_\_

**Age:** \_\_\_\_\_

**Position:** \_\_\_\_\_

\_\_\_\_\_

ATTACH  
PHOTO  
HERE

**Please fill this player form out and return to your manager by October 8<sup>th</sup>.  
If you do not return by the deadline, your child will not be featured.**

**This will be posted on our bulletin board at some point during the hockey season as well  
as in the Didsbury Review. If you do not wish to participate, do not hand this in.**