

St. Benedict School  
18015-93 Avenue NW  
Edmonton, AB  
T5T 1X5  
T. 780-487-2733  
F: 780-481-3159

# STB Hockey Academy New Student Application Form 2026-2027



Name: First: \_\_\_\_\_ Last \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

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

Parent/Guardian Daytime Phone: \_\_\_\_\_

School Presently Attending: \_\_\_\_\_

Grade for 2026-2027: \_\_\_\_\_

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## Student Document Checklist

To assist us in considering your child's registration, the following documentation is required:

\_\_\_\_\_ Most recent report card with attendance

\_\_\_\_\_ Baptismal Certificate (of student or parent with whom the student resides) \*if applicable

\_\_\_\_\_ Birth Certificate

\_\_\_\_\_ ECSD Registration Form has been completed on-line at <https://www.ecsd.net/register>

OR

\_\_\_\_\_ Student is currently enrolled in Edmonton Catholic School Division

[www.stbenedict.ecsd.net](http://www.stbenedict.ecsd.net)

Twitter: @bulldoghockeyac

Instagram: @stbenbulldogs\_ecsd

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## For Hockey Academy:

\_\_\_\_\_ Age level and tier of hockey played for Winter 2025-2026 if applicable

☐

SKATER

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GOALIE

\_\_\_\_\_ Academy Contract

\_\_\_\_\_ Academy Code of Conduct and Expectations Agreement

\_\_\_\_\_ New Student Application Form

If you would like an opportunity to attend an Academy Shadow Skate, please check below.

The Hockey Director will contact you to set up a time.

\_\_\_\_\_ Academy Shadow Skate requested

We may request an interview with the parent/guardian and student before acceptance into the STB Hockey Academy.

**\*Entrance to STB Hockey Academy is dependent on the applicant's ability to demonstrate that he/she can meet the demands of a rigorous program that also includes the requirements of Code of Conduct. The completion of all documents does not guarantee acceptance into the STB Hockey Academy.**

**Acceptance into the STB Hockey Academy will not be confirmed until the application is approved by the school's principal and academy director. Accepted applicants will be notified by phone or email.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only:

Received:

Date:

Time:

Transportation Required: