

# Pioneers Ice Hockey Club Registration 2009-2010 Season



**Tuition for the 2009-2010 season is \$950** and is based on league fees, practice ice time, 15 players per team, sponsors and fundraisers.

**An initial deposit of \$100 is due at time of registration** and will be applied towards the full season tuition. 2<sup>nd</sup> Deposit of \$425 due by August 15<sup>th</sup> and Final payments are due by September 15<sup>th</sup>.

**2009/2010 Season** (October to March) includes 10-12 games plus playoff games, 20+ team practices, 2 Team Jerseys and Socks with team colors, Qualified Coaches and Discount cards for local sporting good stores.

**Team evaluations** will take place closer to the start of the season.

ALL players will be required to register individually with USA Hockey and provide a copy of their confirmation to the club prior to taking the ice. **The USA Hockey registration fee is \$40.00 per player, is paid directly to USA Hockey and is not included in the Pioneers Ice Hockey Club Tuition.** Those individuals playing for multiple teams, will only have to register once per year. USA Hockey Membership information is available at [MemberServices@USAHOCKEY.org](mailto:MemberServices@USAHOCKEY.org).

## Player Information:

Player First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Date of Birth (mm/dd/year) \_\_\_\_\_

Grade (as of 12/31/09) \_\_\_\_\_

Experience (years): Ice \_\_\_\_\_ Roller \_\_\_\_\_

Position: \_\_\_\_\_ Defense \_\_\_\_\_ Forward \_\_\_\_\_ Goalie

Previous Clubs/Teams: \_\_\_\_\_

\_\_\_\_\_

## **Jersey/Chest size – circle one:**

(Youth) SM 35-36" Med 37-38" LG 39-40" XL 41-42"

(Adult) SM 40-42" Med 44-46" LG 48-50"

XL 52-54" 2XL 55-56" 3XL 57-58"

**Jersey No.** 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> Choice \_\_\_\_\_

**Sock Size** (circle one) 24" 28" 30" 32" 36"

## Parent/Guardian Information:

Primary Contact \_\_\_\_\_

Cell# \_\_\_\_\_

Email \_\_\_\_\_

2nd Contact \_\_\_\_\_

Cell# \_\_\_\_\_

Email \_\_\_\_\_

***As a parent run club, I understand my support and involvement is necessary. I would like to help in***

***the following areas:*** Coaching \_\_\_\_\_ Fundraising \_\_\_\_\_

Team Parent \_\_\_\_\_ Game/Practice Support \_\_\_\_\_ Team

Photographer \_\_\_\_\_ Equipment/Uniforms \_\_\_\_\_

Club/board Member \_\_\_\_\_ Sponsorship \_\_\_\_\_

PR/News \_\_\_\_\_ Awards/Banquet \_\_\_\_\_

Other \_\_\_\_\_

## **Waiver of Liability, Release Assumption of Risk & Indemnity Agreement:**

I hereby give my approval, for the player noted, to participate in the Pioneers Ice Hockey Club. I assume the risks inherent to such participation and further release, absolve, indemnify and hold harmless Pioneers Ice Hockey Club, its teams, coaches and fellow participants for any such claim arising due to injury of said participant. I hereby expressly authorize and request the Pioneers Ice Hockey Club, its staff or any members thereof to act for me on my behalf according to their best judgment in any emergency, or injury of said participant in the event I am not available or cannot be reached. I also give permission for the club to use the player's photo and/or name on the Pioneers Ice Hockey Club website and/or in the local paper. Parents of participants also agree to follow the USA Hockey parents code of conduct during all club activities, practices, games and tournaments.

Signature of Parent/Guardian \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

## **Mail registration and deposit to:**

Pioneers Ice Hockey Club  
603 First Ave., Suite 1E  
Raritan, NJ 08869

[www.bbsvicehockey.com](http://www.bbsvicehockey.com)