



August 23, 2013

Warriors Hockey Club
Subject: 2013-14 Season Registration

Dear Current and Future Warriors Families:

We hope everyone is enjoying the summer and looking forward to an exciting high school hockey season. The Board has been working very hard on the assembly of a great program for the upcoming year and we look forward to having you as a part of our hockey program. Our commitment is to build on the success of last year and incorporate additional improvements for the upcoming year.

For the 2013-14 season, we will continue as a “combined” high school hockey club comprised of players from Waubonsie Valley, Metea Valley, Oswego East, and Oswego High Schools. At this time we are preparing for two teams this season (one Varsity team and one JV team).

Last season our players enjoyed a high level of success, led by coach Jimmy Frasco and coach Tim May, in both the Illinois High School Hockey League West Division and the state tournament. Both the Varsity and JV teams finished strong, with the JV team capturing the Scholastic Cup Championship and advancing to Final 8 of the state Blackhawk Cup Tournament. The Varsity finished in the Final 4 in both the Illinois West Cup and the Blackhawk Cup Tournament. This season we intend to field very competitive teams at both the Varsity and Junior Varsity levels.

This letter explains everything you need to know to be a part of the Warriors Hockey Club and it is divided into 4 parts:

- Part 1** - What the Warrior Hockey Club has to offer
- Part 2** - Important dates
- Part 3** - What you need to do to register your player(s)
- Part 4** - What is expected of Warrior Hockey Club members

The club is dedicated to providing a quality program for the development of your high school hockey athlete(s) at the best value. We all know the benefits that this sport offers such as the meaning of teamwork, life long friendships, exciting physical play, and quality time together. We also recognize that it is an expensive sport that is not subsidized by the high schools. We believe we are again positioned to deliver the best possible high school

hockey experience for a reasonable price. We are always open to suggestions for improvement and welcome your involvement in the club.

Part 1: Besides providing each and every player the opportunity to participate in a high school sport, play in roughly 50 games in front of friends and peers, represent his school, earn high school numerals and letters, become an Illinois High School Hockey League West Division All Star, be an All-State player, be eligible for a Blackhawk Scholarship, participate in the high school state playoffs, and have fun competing against other high school rivals, the Warrior Hockey Club also has the following to offer:

- **Quality Coaching Staff** - This year the club has signed an extremely qualified and dedicated coaching staff. The coaching staff will be led again by **Jimmy Frasco**, who will serve for his second year as the Varsity Head Coach. He will be responsible for the overall development of both the Junior Varsity and Varsity players. He has an extensive coaching resume, including 9 years as the Head Coach at Lockport, assistant Varsity coach at Neuqua Valley and an assistant Varsity Coach for Warrior hockey for 4 years prior to accepting the head coach position in 2012/2013. We are glad to have him return as the Head Varsity Coach for his second season with the Warriors and he is looking forward to working with our players. He will be joined on Varsity by **Brian Finnerty** who has been with our program for several years in different roles both as the assistant coach for Varsity and the head coach for our JV team.

Tim May will be returning for his second year as our JV head Coach. We are excited to have him come back for another season. Coach May has a very strong resume where he was the assistant coach at Neuqua as well as a Head Coach at Wheaton-Warrenville South at the Junior Varsity and Varsity levels.

Coach May will be assisted by **Jeremy Dombro**. Coach Dombro has been with our program for several years and is committed to developing our JV players. We are very excited to have him back again as a Coach and a Teacher at Metea Valley High School.

For additional information on our coaching staff please visit our website at www.waubonsiehockey.com.

- **Season Practice Ice Secured** – The Warrior Hockey Club has secured prime practice ice at All Seasons Ice Arena, which is also heavily utilized for Illinois High School Hockey League West Division league games.

The ice times are:

- | | | |
|-------------------|----------------------------|----------------|
| ○ Monday | 8:30 pm to 10:00 pm | JV |
| ○ Tuesday | 8:30 pm to 10:00 pm | Varsity |
| ○ Thursday | 7:30 pm to 8:45 pm | Varsity |
| ○ Thursday | 8:55 pm to 10:10 pm | JV |

It is very convenient to know that our ice times will remain the same throughout the season, which better enables players to meet their school and family obligations.

- **Off-Ice Conditioning** - We will continue to offer off-ice conditioning sessions as a group throughout the season. The off-ice practices will be optional for both Varsity

and JV players. Both groups will receive the same level of instruction from the same instructor through our partnership with Force Sports Training. Please note that this cost is not included in the club fee.

- **Illinois High School Hockey League West Division Membership Renewed** – At 35+ years old, the Illinois High School Hockey League is the most competitive and well run of all high school hockey leagues in the State. The Warriors Hockey Club is proud to be one of the teams in Illinois High School Hockey League West Division again this season. Both Naperville Central and Neuqua Valley high school teams are in the Illinois West Division. This year the Junior Varsity and Varsity teams will both play approximately 28 regular season games, which the majority of are scheduled on weekends and at local ice rinks. Sometimes JV and Varsity will play back to back games at All Seasons which is fun for the Students. The league also offers All-Star Games and Round Robin Playoffs within Illinois High School Hockey League West Division.
- **Fundraising** - The club is dedicated to keeping costs down and making the club affordable. In order for the club to minimize our fees, we are planning to participate in at least two fundraising activities for this season.

The first activity our annual car wash held in late September. It typically raises between \$500-950 and helps build team camaraderie among the players.

The second fundraising activity is the Junior Varsity Pow Wow tournament, which we host at All Seasons Ice Arena. This is an excellent early season tournament that gets the bulk of our fundraising work out of the way. We intend to host a minimum of 12 teams again this year, including our own JV team. This tournament will be held from **September 12th through 15th**. It's a great way for parents to get to know each other while working together at the rink.

- **Tournaments** - Both the Varsity and JV teams will participate in several tournaments throughout the season including the Metro West League Playoffs and the State Finals (Blackhawk Cup).

At this time the Varsity team has registered for at least two local tournaments, one in September and another over Thanksgiving holiday. The JV team will participate in the Pow Wow tournament in September and another tournament over the Thanksgiving holiday. Additional opportunities, both local and out of state, will be evaluated once the season starts. Each team may individually decide to attend one or more additional in-town or out-of-town tournament based on their individual needs and interests. Please note that these additional tournaments would be funded in coordination with the individual team's manager and are not included in the club fee.

- **Non-League Games** – This season we plan to schedule a few exhibition games against competitive clubs in addition to the Illinois High School Hockey League West Division schedule. The result should be a 50 - 55 game season against better matched competition, with no additional impact to fees.
- **Banquets** – The warriors Hockey Club is comprised of great families. In addition to the many weekend games, we will also be gathering in early-September to have our formal **Meet the Coaches / Parent Meeting** (details on time, date and location will

follow). This will be followed by our traditional **Christmas Party** and we will conclude our regular season with a **Year End Banquet**. These activities bring the club together and give us an opportunity to recognize the hard work put in by the players and coaches and distribute awards, numerals and letters.

Part 2: Following are some key dates leading up to the beginning of the 2013-2014 hockey season:

Tryouts & Pre-Season Conditioning

- **Pre-Season Conditioning** - The Warrior Hockey Club will be running a pre-season on-ice conditioning clinic on the following dates and times at All Seasons Ice Arena:

- Monday August 19 8:50 pm – 9:50 pm
- Wednesday August 21 8:50 pm – 9:50 pm
- Thursday August 22 8:50 pm – 9:50 pm

This conditioning clinic is for all Warrior Hockey Club players. It is strongly recommended that all players attend the conditioning clinic prior to tryouts.

- **Tryouts** - The Warrior Hockey Club will be conducting tryouts on the following dates and times at All Seasons Ice Arena. All tryouts will be on the **RED** Rink:

- Monday August 26 8:50 pm – 9:50 pm
- Wednesday August 28 **9:10 pm – 10:10 pm**
- Thursday August 29 8:50 pm – 9:50 pm

Additional camps & training

- **Goalie Clinics** – Illinois High School Hockey League West Division is conducting Goalie Clinics the week of July 29th through August 1st at All Seasons Ice Arena. We also encourage players and coaches to help out at the clinic as shooters.

The clinic dates are:

Monday	July 29th	6:40 to 8:10 PM
Tuesday	July 30th	6:20 to 7:50 PM
Wednesday	July 31st	6:00 to 7:30 PM
Thursday	August 1st	6:50 to 8:20 PM

- **Off-Ice Training** – The Warrior Hockey Club has partnered with Force Sports Training to offer off-ice conditioning for players interested in getting ready for the season.

The fee to participate in this 4 week (8 session) program is \$90 per player. The training is from 6 to 7 pm each day. The schedule for this activity is:

Monday	August 5 th
Wednesday	August 7 th
Friday	August 9 th
Monday	August 12 th
Wednesday	August 14 th

Friday	August 16 th
Monday	August 19 th
Wednesday	August 21 st

For the most current schedule information please visit our website at www.waubonsiehockey.com.

- **Team Selection** - The Varsity Head Coach will select our Varsity and JV teams as soon as possible following the completion of our tryouts, on or about Sunday, September 1st.

The final decision on team assignments will be made as soon as possible following both our tryouts and local club tryouts, on or about Friday, September 6.

Part 3: Our registrar, **Jeff Atkins**, has assembled the attached packet of forms required to register your player(s). The required forms are as follows:

1. **WHC Player Information Form**
2. **WHC Medical Authorization Form**
3. **WHC Waiver and Release of Liability Form**
4. **AHAI High School Hockey Participation Form**
5. **IHSA Pre-participation examination Form (2 Pages)**
6. **WHC Rules and Ethics Form**
7. **WHC Player / Financial Agreement**
8. **Confirmation letter of USA Hockey Registration (To be completed on-line at www.usahockey.com)**
9. **WHC Hockey Player Code of Conduct**
10. **Copy of Birth Certificate (New Players Only)**

These forms and first payment of \$350 are to be submitted to:

**Jeff Atkins
2695 Moss Lane
Aurora, IL 60504**

on or before August 19, which coincides with our first ice slot for the Pre-Season Conditioning Clinic. If you have any questions please contact Jeff at jmatkins13@gmail.com or 630-723-7176.

The Warrior Hockey Club offers the following payment plans:

- **Season Fee - Option 1:** \$4060 per player due at time of registration. This fee includes a non-refundable pre-registration fee of \$350 that covers the pre-season conditioning clinic and tryouts.

- **Season Fee - Option 2:** Eight payments, totaling \$4060 per player.
 - **1st payment of \$350 per player due August 15.** This check is the non-refundable pre-registration fee of \$350 that covers the pre-season conditioning clinic and tryouts.
 - Seven post-dated checks, as follows:
 - 2nd payment of \$530 per player due Sept. 6
 - 3rd payment of \$530 per player due October 10
 - 4th payment of \$530 per player due November 14
 - 5th payment of \$530 per player due December 12
 - 6th payment of \$530 per player due January 16
 - 7th payment of \$530 per player due February 13
 - 8th payment of \$530 per player due March 12

The first payment must be made prior to any player participating on the ice. All checks are to be made payable to the **Waubonsie Valley Hockey Club.**

Goalies are required to pay one-half of the regular player fees (\$2030). The same payment options (with half due) are available for the goalie fees.

Our club's pricing continues to be very competitive, as other area clubs' fees are approximately \$3,900 for Bantam (NIHL) and over \$5,000 for Midget Central States. But more importantly, for a comparable fee, we provide roughly 55 games along with all of the unique advantages of high school hockey. Please note also that the Warrior Hockey Club does not penalize parents for spreading their payments into March, 2014.

The cost of our Home and Away Jerseys (new players only), and Home and Away Socks is included in our season fee for all players. New players will also receive an equipment bag and a logo shell at no additional cost. Warm ups, however, will need to be purchased separately and will cost approximately \$90

Part 4: Many parents and players come to the Warrior Hockey Club from large Hockey Organizations like the Sabres, Huskies, or Cyclones. At these clubs there may be little opportunity to be actively involved or have knowledge that your efforts and fees are going directly to your player rather than subsidizing a large club infrastructure. This is not true at the Warrior Hockey Club. The Club operates on the dedication of its parents and families and all are involved in the success of the program. We recognize that high school memories are forever and we want our players to be able to get the credit they deserve for participating in the toughest of high school sports in an area with very large participation.

All Warrior Hockey Club families participate in our volunteer efforts and this maximizes what we get for our player fees. These volunteer efforts consist of participation working at our Pow Wow tournament to run the clock, keep score, sell concessions or collect the gate fees, run the clock, keep score or wear the yellow Illinois High School Hockey League West Division representative jacket at our regular season games or participate on the board to help organize these events. A volunteer sign up list will be provided at our first club meeting.

In conclusion, the Warrior Hockey Club offers a great opportunity for your hockey player to participate in the sport that they love at the school they attend. The Warrior Hockey Club prides itself on contributing to the development of quality student athletes. This year we have made significant improvements and are looking forward to a great season! If you have any questions please feel free to contact any of the following Board members and look to our website, **waubonsiehockey.com** for updates.

Sincerely,

The Waubonsie Valley Hockey Club Board

Michael Svac
President
msvac@comcast.net

Gary Hill
Vice-President
garyhill1416@sbcglobal.net

Brian Caputo
Treasurer
caputob@sbcglobal.net

Jeff Atkins
Registrar
jmatkins13@gmail.com

Michele Stobart
Secretary
mdstobart@gmail.com

Tom Janis
Oswego Representative
tjanis@gmail.com



**Warriors Hockey Club
Player Information Form
2013-2014 Season**

Please Print

Player's Name: _____ **Date of Birth:** _____

School: _____ **Grade:** _____

Jersey Size: _____ **Hockey Pants Size:** _____

Position: _____

2012-2013 Team: _____

Parent's Names: _____

Address: _____

City: _____ **Zip Code:** _____

Email Addresses (*please print clearly*):

Email 1 _____ **Name** _____

Email 2 _____ **Name** _____

Email 3 _____ **Name** _____

Email 4 _____ **Name** _____

Phone Numbers:

Home: _____

Cell 1 _____ **Name** _____

Cell 2 _____ **Name** _____

Cell 3 _____ **Name** _____



**WAUBONSIE VALLEY HOCKEY CLUB
MEDICAL AUTHORIZATION &
INDEMNIFICATION AGREEMENT**

Player Name _____

Parents/Guardian Names

Home Phone(s) _____

Cell Phone(s) _____

Emergency Contact Name _____ Relation to Skater _____

Emergency Contact Phone(s) _____

Medical Authorization

I, parent or legal guardian of the above named player, do give my consent and approval to any director, officer, head coach, assistant coach, or team manager of The Waubonsie Valley Hockey Club ("WVHC"), an Illinois not-for-profit corporation, or, in their absence, to any senior managerial representative of Jackson Storage Properties, L.P. d/b/a All Seasons Ice Rinks to authorize and approve any reasonably necessary medical or surgical treatment, including hospital care, diagnostic examinations or tests, in the event that the above named player is injured while participating in or attending any activities operated or sponsored by Waubonsie Valley Hockey Club during the current Program Year (August 1, 2013 through April 31, 2014). This consent and authorization is valid only if, after reasonable effort has been made, the parent or legal guardian of the above named player cannot be reached to give express instructions as to the care and treatment of the above named player.

I agree to defend, indemnify and hold harmless from any liability for losses, claims, damages, costs and expenses (including attorney fees), (1) WVHC and any director, officer, head coach, assistant coach, or team manager of WVHC, and (2) Jackson Storage Properties, L.P. d/b/a All Seasons Ice Rinks, and any owner, operator or senior managerial representative of the above entity; with respect to any action taken on behalf of the above named player pursuant to this Medical Authorization.

Date

Signature of Parent or Guardian

Please note that this Medical Authorization will remain with the player's team manager throughout the season. Therefore, one form per player must be completed, signed and returned to the first tryout / evaluation.



WAUBONSIE VALLEY HOCKEY CLUB
RELEASE, ASSUMPTION OF RISK & INDEMNITY AGREEMENT
2013 / 2014 Hockey Season

Player Name _____

Player Name _____

Parent/Guardian Name(s) _____

In consideration of the enrollment and participation of the participant(s) listed above ("Participants") in the Waubonsie Valley Hockey Club ("WVHC") youth hockey program for the 2013 Spring season ("WVHC Program"), which may include hockey camps, hockey clinics, skills sessions, hockey and skating lessons, the sport of ice hockey, and/or any on-ice or off-ice activities related or incident thereto, including without limitation, floor hockey, roller hockey, general conditioning and physical fitness activities, rugby and other similar sporting activities (collectively referred to as "Activities"), I, parent or legal guardian ("Parent") of the Participants, and the Participants, agree as follows:

1. **Release.** Participant and Parent hereby waive, release, relinquish and discharge WVHC, Jackson Storage Properties, L.P. d/b/a All Seasons Ice Rinks, and any other ice arenas or facilities at which the Activities take place, together with their agents, employees, officers, owners, operators, instructors, coaches, managers, promoters, sponsors, other participants, volunteers, and contractors ("Instructors"), on behalf of the Participant and Parent, and their children, parents, heirs, executors, administrators and assigns, from and against any and all claims for liability and causes of action, including for personal injury, property damage or loss, or wrongful death occurring to Participant or Parent, arising out of or related to participation in or attendance at the Activities, whenever or however they occur and for such period as the Activities may continue.

2. **Assumption of Risk.** Participant and Parent acknowledge, understand and assume all risks relating to the Activities, and understand that the Activities involve risks to Parent and Participant's person including bodily injury, partial or total disability, paralysis and death, and associated damages and that Participant and Parent understand these risks. Participant and Parent acknowledge that these risks and dangers may be caused by the negligence of the Participant or the negligence of others, including the Instructors and that there may be risks and dangers not known or not reasonably foreseeable at this time. Participant and Parent acknowledge, understand and assume the risks, if any, arising from the conditions and use of ice hockey rinks and related premises and acknowledge and understand that they are assuming the risk of and are waiving the right to bring any cause of action (including any cause of action based on negligence) arising from the performance, or failure to perform, maintenance, inspection, supervision or control of such areas and for the failure to warn of dangerous conditions existing at such rinks or facilities, for negligent selection of certain Instructors, or negligent supervision or instruction by Instructors. Participant and Parent acknowledge, understand and agree that all of the risks and dangers described throughout this agreement, including those caused by the negligence of Participant and/or others, are included within the release set forth in **Paragraph 1** above.

3. **Indemnification.** Participant and Parent agree that if (i) any claim for Parent's or Participant's personal injuries, property damage or wrongful death is commenced against Instructors; or (ii) a third party asserts a claim of personal injury, property damage or wrongful death against Instructors arising from any act or omission of Participant or Parent; then Participant and Parent shall defend, indemnify and hold harmless Instructors from and against any and all such claims or causes of action, by whomever or wherever made or asserted, for damages arising from or related to Participant's or such third party's personal injuries, property damage or wrongful death and all costs associated with such claims or causes of action, including attorney fees.

4. **Acknowledgments & Use of Name and Image.** Participant and Parent acknowledge and agree that (i) they have been provided sufficient opportunity to read this agreement; (ii) they understand this agreement; (iii) they are fully advised of the dangers of the Activities; (iv) participation in the Activities is voluntary; (v) they agree to be bound by the terms of this agreement; and (vi) Participant does not have any medical, physical or emotional condition that may result in injury or harm to Participant or any other party participating in the Activities. Participant and Parent agree that Participant's name and image may be used in perpetuity in photographs, motion picture films, television broadcasts, and/or in any radio broadcasts covering or promoting the Activities, without payment to Participant or Parent in connection therewith.

5. **Miscellaneous.** This agreement shall be subject to and governed by the applicable laws of the State of Illinois, without giving effect to the principles thereof relating to conflicts of laws. Participant and Parent irrevocably agree that any legal action, suit or proceeding brought by them or on their behalf in any way arising out of this agreement must be brought solely and exclusively in Will County, Illinois and they irrevocably submit to the sole and exclusive jurisdiction of the federal and state courts in Illinois in personam, generally and unconditionally with respect to any action, suit or proceeding brought by them against the Instructors. In the event that any provision of this agreement conflicts with the law under which this agreement is to be construed or if any such provision is held invalid or unenforceable by a court with jurisdiction, such provision shall be deemed to be restated to reflect as nearly as possible the original intent in accordance with applicable law. The remaining provisions of this agreement and the application of the challenged provision to persons or circumstances other than those as to which it is invalid or unenforceable shall not be affected thereby, and each such provision shall be valid and enforceable to the full extent permitted by law. The paragraph headings used herein are for reference and convenience only and shall not be considered in the interpretation of this agreement.

(Please complete, sign and bring one form per family. No player will be permitted to participate until this form is submitted)

Date Signature of Parent or Guardian

Date Signature of Participant Age

Date Signature of Participant Age



AHAI HIGH SCHOOL HOCKEY PARTICIPATION FORM

Download the form to your computer. Complete all fields - then print the form for signature.



Season 20__ - 20__

Player's Name _____ School Name _____
 Street Address _____ School Address _____
 City _____ State _____ Zip _____ School City _____ State _____ Zip _____
 Phone _____ School Phone _____
 Date of Birth _____ Hockey Club _____

HOLD HARMLESS AGREEMENT:

We recognize and acknowledge that ice hockey, as well as other contact sports, is a game in which there are risks of injury to the participants. Because of this, and desiring that the above named minor participates as a player with the above High School Hockey Club, and in consideration of his/her enrollment and participation, we agree that we shall indemnify and save the above High School Club, the school(s), its agents and coaches; the High School Hockey League, and its Divisions, their officers, directors, agents and personnel; each ice rink in which the League participates, and its agents and personnel; USA Hockey and the Amateur Hockey Association Illinois, Inc. harmless from any and all liability for damages because of injury or otherwise sustained by the above named minor; arising directly or indirectly out of or in connection with his/her enrollment and/or participation as a player with the above named High School Hockey Club during the above specified season.

Signature of Player _____ Date _____

Signature of Parent/Guardian _____ Date _____

DOCTOR'S CERTIFICATION OF EXAMINATION AND APPROVAL TO PARTICIPATE:

Doctor's Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Date Examined: _____

I, the above doctor, have given a physical examination to the above player and I have found him/her physically fit to practice and play ice hockey with the above High School Hockey Club and to participate in High School Hockey for the above specified season.

Doctor's Signature _____ Date _____

HOSPITAL RELEASE:

The player named above has my permission to engage in all hockey activities, i.e. games, practices, drills, etc., for the above specified season. In the event of injury, I hereby give my permission to hospitalize and secure treatment, including injections, anesthesia or surgery for the above named player.

Signature of Parent/Guardian _____ Date _____

Name of Parent/Guardian _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Next of Kin _____

Home Phone _____ Cell Phone _____

Health Insurance Plan: _____ Group #: _____ Policy # _____

Download the form to your computer. Complete all fields - then print the form for signature. All Signatures **MUST** be Originals.
Submit Original Form to Club Registrar and keep a copy for your records.
Club Registrar forwards a copy to the League/Division as directed.

Club Initials _____ Date ____/____/____ League/Division Initials _____ Date ____/____/____



Pre-participation Examination



To be completed by athlete or parent prior to examination.

Name _____ School Year _____
Last First Middle

Address _____ City/State _____

Phone No. _____ Birthdate _____ Age _____ Class _____ Student ID No. _____

Parent's Name _____ Phone No. _____

Address _____ City/State _____

HISTORY FORM

Medicines and Allergies: Please list all of the prescription and over-the-counter medicines and supplements (herbal and nutritional) that you are currently taking

Do you have any allergies? Yes No If yes, please identify specific allergy below.
 Medicines Pollens Food Stinging Insects

Explain "Yes" answers below. Circle questions you don't know the answers to.

GENERAL QUESTIONS	Yes	No
1. Has a doctor ever denied or restricted your participation in sports for any reason?		
2. Do you have any ongoing medical conditions? If so, please identify below: <input type="checkbox"/> Asthma <input type="checkbox"/> Anemia <input type="checkbox"/> Diabetes <input type="checkbox"/> Infections Other: _____		
3. Have you ever spent the night in the hospital?		
4. Have you ever had surgery?		
HEART HEALTH QUESTIONS ABOUT YOU	Yes	No
5. Have you ever passed out or nearly passed out DURING or AFTER exercise?		
6. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?		
7. Does your heart ever race or skip beats (irregular beats) during exercise?		
8. Has a doctor ever told you that you have any heart problems? If so, check all that apply: <input type="checkbox"/> High blood pressure <input type="checkbox"/> A heart murmur <input type="checkbox"/> High cholesterol <input type="checkbox"/> A heart infection <input type="checkbox"/> Kawasaki disease Other: _____		
9. Has a doctor ever ordered a test for your heart? (For example, ECG/EKG, echocardiogram)		
10. Do you get lightheaded or feel more short of breath than expected during exercise?		
11. Have you ever had an unexplained seizure?		
12. Do you get more tired or short of breath more quickly than your friends during exercise?		
HEART HEALTH QUESTIONS ABOUT YOUR FAMILY	Yes	No
13. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50 (including drowning, unexplained car accident, or sudden infant death syndrome)?		
14. Does anyone in your family have hypertrophic cardiomyopathy, Marfan syndrome, arrhythmic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia?		
15. Does anyone in your family have a heart problem, pacemaker, or implanted defibrillator?		
16. Has anyone in your family had unexplained fainting, unexplained seizures, or near drowning?		
BONE AND JOINT QUESTIONS	Yes	No
17. Have you ever had an injury to a bone, muscle, ligament, or tendon that caused you to miss a practice or a game?		
18. Have you ever had any broken or fractured bones or dislocated joints?		
19. Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast, or crutches?		
20. Have you ever had a stress fracture?		
21. Have you ever been told that you have or have you had an x-ray for neck instability or atlantoaxial instability? (Down syndrome or dwarfism)		
22. Do you regularly use a brace, orthotics, or other assistive device?		
23. Do you have a bone, muscle, or joint injury that bothers you?		
24. Do any of your joints become painful, swollen, feel warm, or look red?		
25. Do you have any history of juvenile arthritis or connective tissue disease?		

MEDICAL QUESTIONS	Yes	No
26. Do you cough, wheeze, or have difficulty breathing during or after exercise?		
27. Have you ever used an inhaler or taken asthma medicine?		
28. Is there anyone in your family who has asthma?		
29. Were you born without or are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?		
30. Do you have groin pain or a painful bulge or hernia in the groin area?		
31. Have you had infectious mononucleosis (mono) within the last month?		
32. Do you have any rashes, pressure sores, or other skin problems?		
33. Have you had a herpes or MRSA skin infection?		
34. Have you ever had a head injury or concussion?		
35. Have you ever had a hit or blow to the head that caused confusion, prolonged headache, or memory problems?		
36. Do you have a history of seizure disorder?		
37. Do you have headaches with exercise?		
38. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling?		
39. Have you ever been unable to move your arms or legs after being hit or falling?		
40. Have you ever become ill while exercising in the heat?		
41. Do you get frequent muscle cramps when exercising?		
42. Do you or someone in your family have sickle cell trait or disease?		
43. Have you had any problems with your eyes or vision?		
44. Have you had any eye injuries?		
45. Do you wear glasses or contact lenses?		
46. Do you wear protective eyewear, such as goggles or a face shield?		
47. Do you worry about your weight?		
48. Are you trying to or has anyone recommended that you gain or lose weight?		
49. Are you on a special diet or do you avoid certain types of foods?		
50. Have you ever had an eating disorder?		
51. Have you or any family member or relative been diagnosed with cancer?		
52. Do you have any concerns that you would like to discuss with a doctor?		
FEMALES ONLY	Yes	No
53. Have you ever had a menstrual period?		
54. How old were you when you had your first menstrual period?		
55. How many periods have you had in the last 12 months?		

Explain "yes" answers here

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.

Signature of athlete _____ Signature of parent/guardian _____ Date _____



Pre-participation Examination



PHYSICAL EXAMINATION FORM

Name _____
Last First Middle

EXAMINATION			
Height	Weight	<input type="checkbox"/> Male	<input type="checkbox"/> Female
BP / (/)	Pulse	Vision R 20/	L 20/
		Corrected	<input type="checkbox"/> Y <input type="checkbox"/> N
MEDICAL	NORMAL	ABNORMAL FINDINGS	
Appearance • Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, arm span > height, hyperlaxity, myopia, MVP, aortic insufficiency)			
Eyes/ears/nose/throat • Pupils equal • Hearing			
Lymph nodes			
Heart ^a • Murmurs (auscultation standing, supine, +/- Valsalva) • Location of point of maximal impulse (PMI)			
Pulses • Simultaneous femoral and radial pulses			
Lungs			
Abdomen			
Genitourinary (males only) ^b			
Skin • HSV, lesions suggestive of MRSA, tinea corporis			
Neurologic ^c			
MUSCULOSKELETAL			
Neck			
Back			
Shoulder/arm			
Elbow/forearm			
Wrist/hand/fingers			
Hip/thigh			
Knee			
Leg/Ankle			
Foot/toes			
Functional • Duck-walk, single leg hop			

^aConsider ECG, echocardiogram, and referral to cardiology for abnormal cardiac history or exam.
^bConsider GU exam if in private setting. Having third party present is recommended.
^cConsider cognitive evaluation or baseline neuropsychiatric testing if a history of significant concussion.

On the basis of the examination on this day, I approve this child's participation in interscholastic sports for 395 days from this date.

Yes _____ No _____ Limited _____ Examination Date _____

Additional Comments:

Physician's Signature _____ Physician's Name _____

Physician's Assistant Signature* _____ PA's Name _____

Advanced Nurse Practitioner's Signature* _____ ANP's Name _____

*effective January 2003, the IHSA Board of Directors approved a recommendation, consistent with the Illinois School Code, that allows Physician's Assistants or Advanced Nurse Practitioners to sign off on physicals.

IHSA Steroid Testing Policy Consent to Random Testing

(This section for high school students only)
2013-2014 school term

As a prerequisite to participation in IHSA athletic activities, we agree that I/our student will not use performance-enhancing substances as defined in the IHSA Performance-Enhancing Substance Testing Program Protocol. We have reviewed the policy and understand that I/our student may be asked to submit to testing for the presence of performance-enhancing substances in my/his/her body either during IHSA state series events or during the school day, and I/our student do/does hereby agree to submit to such testing and analysis by a certified laboratory. We further understand and agree that the results of the performance-enhancing substance testing may be provided to certain individuals in my/our student's high school as specified in the IHSA Performance-Enhancing Substance Testing Program Protocol which is available on the IHSA website at www.IHSA.org. We understand and agree that the results of the performance-enhancing substance testing will be held confidential to the extent required by law. We understand that failure to provide accurate and truthful information could subject me/our student to penalties as determined by IHSA.

A complete list of the current IHSA Banned Substance Classes can be accessed at http://www.ihsa.org/initiatives/sportsMedicine/files/IHSA_banned_substance_classes.pdf

Signature of student-athlete _____ Date _____ Signature of parent-guardian _____ Date _____



Warriors Hockey Club Rules & Ethics Policy – 2013/2014 Season

The Warriors Hockey Club is committed to the development of our players as both athletes and individuals. To meet this goal the Warriors Hockey Club players, coaches, parents, family members and other members of the organization (WVHC Members) are expected to act in a responsible, respectful, honorable and upstanding manner both on the ice and off the ice. WVHC players are also expected to follow team rules and their coaches' proper instructions.

Zero Tolerance Rule

No WVHC Member shall physically or verbally abuse, threaten, taunt, or ridicule in any form any on-ice or off-ice official, rink staff, tournament official, player, coach, parent or fan. No obscene language will be used even if not directed at a specific person. No objects shall be thrown in the spectator's area, on the ice, at the players' bench or at a penalty box. Simply, any lack of respect or demonstration of unsportsmanlike conduct will not be tolerated and will be a violation of the Zero Tolerance Rule. This Zero Tolerance Rule applies to all WVHC Members.

Off-Ice Behavior

The "Zero Tolerance Rule" applies off the ice as well as on the ice. It applies to all WVHC Members, before, during or after a game, whether inside or outside of the rink. Any time a WVHC Player is at a location as a member of the Warriors Hockey Club, they are subject to this rule. This includes all practice and league games, tournaments, hotel stays, social functions, or any other situation where the individual is identified as a member of the WVHC.

Twenty Four Hour Rule

WVHC Members should wait twenty four hours after an event before raising issues with coaches and team members, except for those actions requiring immediate notification as described below.

Immediate Notification

The Amateur Hockey Association of Illinois (AHA) Rules and Regulations require that WVHC Members give AHA immediate notification of certain allegations. Therefore, all WVHC Members shall immediately contact the WVHC Board and provide all pertinent information regarding any allegation of discrimination, abuse or potential abuse, including ethnic, racial, sexual, physical or mental abuse, or consumption, use, sale, gift or abuse of mood altering substances.

Team Rules

The following is a list of the team rules that apply to all WVHC Players and may be supplemented by additional rules to be provided by the coaches.

- Every player is an important part of the club and team and is expected to be at every practice and game. If a player is not going to be at a practice or game they are required to notify the coach.
- All players are expected to look like a team and provide a positive impression of the club. To accomplish this all players are expected to wear a collared shirt, tie, dress pants and dress shoes (not athletic shoes) to all games. This requirement may be modified to the team warm ups at the coach's discretion.
- Matching game socks and jerseys are to be worn for each game. These items are not to be worn at practices.
- If assigned, players are required to bring water bottles and pucks to practices and games. All water bottles are to be washed and refilled prior to each game and practice.



Player / Financial Agreement

This Agreement is made effective August 13, 2013, between the parent or guardian ("Parent") and the **Waubonsie Valley Hockey Club** ("Club").

The club is currently classified as a "combined" high school hockey team, as defined by the Amateur Hockey Association of Illinois (AHA). For the 2013 / 2014 high school hockey season, the club is comprised of four different high schools (Waubonsie Valley, Metea Valley, Oswego and Oswego East) from two different school districts (District 204 and District 308).

Parent and Player agree that Player shall play for the **Waubonsie Valley Hockey Club** for one full season, commencing August 30, 2013 and ending March 31, 2014. Parent and Player agree that Player shall be actively involved with the Club's team. For purposes of this Agreement, "actively involved" shall be defined as participating in all scheduled practice sessions and games in which Player is called upon to participate, unless unable to do so due to medical or educational reasons, or other valid reason which must be communicated to and approved by the team head coach in advance of the scheduled practice and/or game.

Per AHA requirements for combined clubs, we are required to accept all applications that meet the club's try-out policy and is not permitted to reject a player eligibility unless for personal safety reasons (that would require prior approval by an AHA Board representative).

Any player planning to roster with one or more teams, in addition to the Club, is required to submit in writing (to the Board of Directors) their intent to "double roster" with another USA Hockey registered organization at the time of registration for team tryouts.

Parent and Player agree that the Club shall have the right to suspend Player at the discretion of the Club's Board of Directors in accordance with the Club's by-laws and Rules and Ethics Policy. Parent and Player agree that, for Player to remain on the team, Parent and Player must (1) commit no act detrimental to the sport of ice hockey, the Club or the team; (2) comply with all provisions stated in this Agreement; and (3) abide by the Club's by-laws, Rules and Ethics Policy, and the Rules and Regulations of USA Hockey and Amateur Hockey Association Illinois (AHA).

Upon notification of acceptance to the Club the Parent agrees to pay a non-refundable pre-registration fee of \$350 by August 15th. This fee covers the pre-season conditioning clinic and tryouts. This payment will be applied toward the season fee.

Full payment of Player's annual fee is due by September 6th in the form of a check payable to Club. In lieu of full payment, a payment plan ("installment plan") will be made available, solely at the discretion of the Club, which requires Parent to pay seven equal installments via post-dated checks, with the first payment and six post-dated payments due by September 6th. The payment of the season fee (or the first installment payment) will serve to reserve Player's place on the roster.

Please note that checks returned for non-sufficient funds (NSF) or a stopped payment on any post-dated check will result in an additional fee of **\$25 per instance** and the immediate suspension of the Player from all Club and team activities until Parent has resolved the situation to the satisfaction of the Club.

Player will not be placed on the team roster until payment of the annual club fee has been made. In addition, Parent and Player agree they shall submit all necessary forms, including but

not limited to (i) USA Hockey Online Program Participation Registration; (ii) Club Information form; (iii) Club Player / Financial Agreement form; (iv) Club Medical Authorization form; (v) Club Waiver and Release of Liability form; (vi) AHAI High School Hockey Participation form (vii) IHSA Pre-participation Examination form; (viii) Club Hockey Player Code of Conduct form (to be signed by **both** Parents, where applicable); (ix) Rules and Ethics Policy; (x) Letter of intent to "Double Roster" with another hockey team in addition to the Warriors, and valid copy of player Birth Certificate.

Parent and Player agree and understand that the Annual Club Fee is intended to cover game costs (including exhibition games, pre-season tournament games, league games, and post-season league and State Tournament games) practice costs, game jerseys and socks, and general expenses. Any additional costs for additional tournaments, player transportation, hotel accommodations, meals, equipment, warm-ups and the like are the responsibility of the Parent.

Parent understands that there will be **no refund** of any portion of the annual Club fee and the Parent shall remain responsible to pay the **entire annual Club fee** even if, after execution of this Agreement and the rostering of the Player, Player withdraws from the Club for any reason, excluding a season-ending injury. (The Board reserves the right to deviate from this policy under circumstances that in its sole discretion it finds extraordinary and compelling.) In the case of a season-ending injury sustained during a scheduled Club practice or game, Club will pro-rate the total annual fee for Player on the following basis and issue a refund as appropriate, depending on when the injury was sustained:

<u>Season-ending Injury Sustained</u>	<u>Pro-Rated Player Fee</u>
Prior to October 20	33%
Prior to November 20	50%
Prior to December 20	66%
December 20 or after	100%

Parent and Player understand that failure to meet any of the obligations set forth in this Agreement shall be grounds for suspension of Player's participation in the activities of the Club and team until such obligations have been fully met.

In the event your account becomes seriously delinquent and it becomes necessary for the club to engage a collection agency to collect your outstanding balance, the costs of collection will be added to your balance.

Player Signature: _____ **Date:** _____

Name (Print): _____

Parent Signature: _____ **Date:** _____

Name (Print): _____

Club Officer Signature: _____ **Date:** _____

Name (Print): _____ **Title:** _____



Warrior Hockey

Player Code of Conduct

Participation in Warrior Hockey club is a privilege, which allows high school players to enjoy their sport while also enjoying the camaraderie and pride that develops while playing with their fellow students. This privilege places student participants in a role of representing the hockey organization, their high schools and their fellow students.

The Warrior Hockey Club fully supports the “**Participant Code of Conduct**” which has been set by USA Hockey.

1. No swearing or abusive language on the bench, in the locker room, in the rink or at any team function.
2. No lashing out at any official no matter what the call is. The coaching staff will handle all matters pertaining to officiating.
3. Anyone who receives a penalty will skate directly to the penalty box.
4. Fighting will not be tolerated. Fighting will result in an appearance before the Club’s Rules & Ethics Committee.
5. There will be no drinking [of alcohol] , smoking, chewing of tobacco or use of illegal substance at any team function.
6. I will conduct myself in a befitting manner at all facilities (ice rink, hotel, restaurant, etc.) during all team functions.
7. I understand that players or team officials who cannot abide by these rules or who violates them will be subject to further disciplinary actions. [Up to an including expulsion from Warrior Hockey Club]
8. Warrior Hockey Club supports the Zero Tolerance Policy, set forth in our Rules and Ethics policy

Player Signature

Date

Parent Signature

Date

Printed name

Printed name



Waubonsie Valley “Warrior” Hockey Club

Tryout Policy

All High School students from Waubonsie Valley (District 204), Metea Valley (District 204), Oswego (District 308) and Oswego East (District 308) that plan to participate in the Warrior Hockey Club as a player will be required to meet all the requirements stated within this policy to be eligible for a roster position for the 2013 / 2014 season.

The club is currently classified as a “combined” high school hockey team, as defined by the Amateur Hockey Association of Illinois (AHA). Per AHA requirements for “combined” clubs, we are required to accept all applications that meet the club’s try-out policy and are not permitted to reject a player eligibility unless for personal safety reasons (that would require prior approval by an AHA Board representative).

For the 2013 / 2014 season, a player must conform to the following requirements to be eligible for selection to one of the Warrior Club Teams.

1. Attend at least one of the three tryout dates listed in the registration packet which is also posted on the Warrior Club Web Site. By attending at least one of the three tryout sessions a player will be eligible for a roster position on a JV team.
2. To be eligible for a roster position on a Varsity team, the player must attend all three try-out sessions listed in the registration packet which is also posted on the Club Web Site. (Any planned absence from the tryout must be approved by the Varsity Head Coach and the Board of Directors prior to the tryout date missed.)
3. Pay in full the registration fee per the payment plans outlined in the 2013 / 2014 registration packet. The fee is \$350.

Prior to or at the time of the first team tryout date attended the following documents must be provided and appropriate fees submitted (unless noted below):

1. Registration Fee (\$350, payable to Waubonsie Valley Hockey Club)
2. Current USA Hockey Confirmation Letter or Confirmation Number for 2013 / 2014 season.
3. Completed Warrior Hockey Club Information Form
4. Completed Warrior Hockey Club Player / Financial Agreement.
5. Completed Warrior Hockey Club Medical Authorization Form
6. Completed Warrior Hockey Club Waiver and Release of Liability Form
7. Completed (with Physician Signature) Warrior Hockey Club AHA/ High School Hockey Participation Form (Due By September 6, 2013 unless approved by the Registrar)
8. Completed (with Physician Signature) IHSA Pre-participation examination Form (Due By September 6, 2013 unless approved by the Registrar)
9. Completed Warrior Hockey Club Hockey Player Code of Conduct
10. Written notification to Warrior Board the player's intent to "Double Roster" with another hockey team in addition to the Warriors.
11. Copy of Birth Certificate (New Players only)

By signing the "Player Agreement" the player is committing to play for the Waubonsie Valley Hockey Club for one full season, commencing August 30, 2013 and ending March 31, 2014 and will be actively involved with the Club's team by participating in all scheduled practice sessions and games in which Player is called upon to participate (unless unable to do so due to medical or educational reasons, or another valid reason). The Player fee for the season is \$4060. The player name will not be added to the roster until the financial agreement is completed and approved by the Board.

If the player agreement is not completed in full and any other required document is not provided as required per this policy then the Player will not be eligible to participate in the Warrior club program for the 2013 / 2014 season.