ICE HOUSE YOUTH HOCKEY

SPRING 2015 YOUTH & HIGH SCHOOL LEAGUES

League Registration Deadline March 3, 2015 Register online @ www.icehousenj.com

MITE CROSS ICE • MITE FULL ICE • SQUIRT • PEEWEE • BANTAM • HIGH SCHOOL

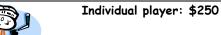
- Season Length: March 21- June 14, 2015
- 10 regular season games (11 games for mite cross ice)
- Top 4 teams at each age bracket qualify for playoffs
- Game schedules and individual team assignments will be available on our website by March 14
- Team Entries will receive 4 practices (first come first served with team deposit). Scheduling requests must accompany application; requests will be considered but cannot be guaranteed. Team Entries must supply their own coaches and jerseys A \$2,000.00 deposit must accompany team application by March 3, 2015. The balance is due by May 1, 2015. Once your team application and deposit have been submitted and the divisions have been set, you will be emailed a USER NAME and PASSWORD to input and manage your team roster online. You will be required to enter each player's name, jersey #, position, date of birth, and email address. Changes to the roster can be made up until May 10th 2015, at which point rosters will be frozen. For questions about inputting your roster contact Glenn Carlough at gcarlough@icehousenj.com. Teams may roster up to 20 players and must register their players and coaches online with USA Hockey to compete in the 2015 Spring Ice House Hockey League. To register please visit https://www.usahockeyregistration.com/ to fill out the appropriate form and pay the applicable fee. Confirmation numbers for teams (all players and coaches) must be emailed to Glenn Carlough in an excel spreadsheet.
- <u>Individuals Applicant</u>: Payment in Full with application. Jersey distribution will be 30 minutes prior to your first game. Individual teams do not practice. All players must register with USA Hockey to compete in the Spring 2015 Ice House Hockey League. To register please visit https://www.usahockeyregistration.com USA Hockey confirmation form must be submitted with your application. Players must have full ice hockey equipment.

GAME DAYS AND LEAGUE FEES

MITE CROSS ICE LEAGUE 8U* (no playoffs)

Players born in 2006 & younger

Games played on Sundays at 12:45pm



* Cross-ice games are played to introduce the fundamentals of ice hockey to the novice player. By dividing the rink into three smaller rinks/games the players have more fun and develop faster. Each child becomes more involved in the play and has increased opportunities to touch the puck. The emphasis in this league is on skill development and fun. Rosters will be flexible, no scores or standings will be recorded.

MITE FULL ICE LEAGUE 8U	Individual player: \$275	Team: \$3700
Players born in 2006-2008		
Games will be played on Sundays		
SQUIRT LEAGUE 10U	Individual player: \$275	Team: \$3700
Players born in 2004 & 2005		
Games will be played on Sundays		
PEEWEE LEAGUE 12U	Individual player: \$295	Team: \$3975
Players born in 2002 & 2003		
Games will be played on Sundays		
BANTAM LEAGUE 14U	Individual player: \$295	Team: \$3975
Players born in 2000 & 2001		
Games will be played on Saturdays		
HIGH SCHOOL LEAGUE	Individual player: \$295	Team: \$3975
Players must be in High School		
Games will be played on Saturdays	_	

2015 SPRING YOUTH LEAGUE APPLICATION

To register, fill out application in its entirety, then mail or fax completed form with payment (or register on line @ www.icehousenj.com)

Team Entry

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Team Entry Nam	e:							
Team Contact:								
E-Mail:								
Cell Phone:								
Street Address:								
City:		State:			Zip:			
Circle Division:	MITE	SQUIRT	PEEWEE	BAN	NTAM	HIGH SCHOOL		
Individual Ap	plicant	t						
Players Name:								
Date of Birth:			Position:					
E-Mail:								
Cell Phone:								
Street Address:								
City:		Sta	State:					
Circle Division: MITE CR	OSS ICE	MITE FULL ICE	SQUIRT	PEEWEE	BANTAM	HIGH SCHOOL		
 Teams Entries: \$2,000.00 deposit per team with application / Balance due by May 1. Individual Applicant: payment in full with application 								
PAYMENT INFORMATION NO REFUNDS OR CREDITS / \$25 CHARGE FOR RETURNED CHECKS								
Amount \$		Chec	Check # (make checks payable to Ice House Hockey)			e House Hockey)		
Credit Card #					Exp. Date	·		
	Visa	MC	Amex					
Name & Billing Address	on Credit Car	rd						
PARTICIPANT WAIVER AND RE. I acknowledge and assume all risks of injury associa directors, officers, members, employees, attorneys, caused, resulting directly or indirectly from my child is provided to any ICE HOUSE program participant. I release, discharge, and promise not to sue the REL or may have for, upon, or by reason of any injury or I agree to indemnify and hold harmless the RELEA' any and all ICE HOUSE programs at any time proce I grant ICE HOUSE the right to use all photographs	nted with participation in representatives, insurers, I's participation in any IC including my child, and EASEES from and with damage to me or my chil BEES from an injury or d eding, during, or after sur	the ICE HOUSE'S skating programagents, successors, and assigns (indize HOUSE programs at any time prolements, by the ICE HOUSE. respect to any and all claims, actions d. I intend this release to be a generamage, however caused, sustained by the program is in session.	vidually and collectively occeding, during or after s s, suits, liabilities, or dam al release of any and all cl y an invitee or guest if eit	the 'RELEASEES'), shal such program is in session tages whatsoever which at laims to the fullest extent ther me or my child result	Il not be liable to me or n n. I further understand th gainst the RELEASEES, permissible by law.	ny child for any injury or damage, however at no medical, dental, or accident insurance my child and I have, or hereafter can, shall		
Print Name		Parent/Guardian Signature				Date		