

**Prince William Hockey Club Travel Program Registration Form 2008-2009**

**Player Information:** Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Male / Female \_\_\_\_\_ Parent(s) Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Parent Work # \_\_\_\_\_ Cell Phone \_\_\_\_\_  
E-Mail Address (PWHC communication) \_\_\_\_\_ Team/Level \_\_\_\_\_

Please check any of the following that apply:

- \_\_\_\_\_ Any known medical condition. Please describe: \_\_\_\_\_
- \_\_\_\_\_ Player is eligible for 10% Sibling discount. List sibling(s): \_\_\_\_\_
- \_\_\_\_\_ Player is eligible for a Refer-A-Friend discount. List new player(s) joining PWHC based on your referral: \_\_\_\_\_
- \_\_\_\_\_ Player is eligible for 10% Goalie discount.

I/We, as Player if Player has reached the age of majority, or as the parent(s) and/or legal guardian(s) of Player if Player is a minor, have read and agree to the following statements, which I/we have initialed to confirm my review and agreement:

\_\_\_\_\_ **Understanding registration fees.** I/We fully understand that the registration fees for players committing to the Prince William Hockey Club (PWHC) Travel Program will be based on the total number of players that participate on that team or in that age classification. I am aware that Travel Program registration fees could fall within the following ranges, based on a range of total possible players per team (or average players per team in an age classification) (as noted in the parenthesis) and that the final registration fee for each team or age classification will be established when PWHC believes that the total number of players on a team or average players per team in an age classification can be reasonably determined:

- \_\_\_\_\_ Mite travel team: range from \$1,379 (@20 players) to \$2,155 (@ 12 players) for a skater.
- \_\_\_\_\_ Squirt travel team(s): range from \$1,712 (@20 players) to \$2,638 (@12 players) for a skater.
- \_\_\_\_\_ PeeWee travel team(s): range from \$1,746 (@20 players) to \$2,695 (@12 players) for a skater.
- \_\_\_\_\_ Bantam travel team(s): range from \$1,709 (@20 players) to \$2,633 (@12 players) for a skater.
- \_\_\_\_\_ Midget 16U travel team: range from \$1,910 (@20 players) to \$2,985 (@12 players) for a skater.
- \_\_\_\_\_ Midget 18U travel team: range from \$1,920 (@20 players) to \$2,995 (@12 players) for a skater.
- \_\_\_\_\_ Girls 16U travel team: range from \$1,680 (@20 players) to \$2,478 (@12 players) for a skater.

**PAID-IN-FULL DISCOUNT:** If you pay your balance in full by July 1, 2008, you will be eligible for a \$75 discount (except for players selected to a team formed as a "Lite" team, for whom the paid-in-full discount is \$50). If the final registration fee has not been established for a team or age classification, you will still be eligible for this discount if: (i) you pay in full by July 1, 2008 the amount equal to the lower end of the range for the appropriate team or age classification (e.g., that would be established for 20 players), and (ii) pay the remainder in full no later than 14 calendar days after being advised of the final registration fee for that team or age classification.

\_\_\_\_\_ **Agreement to pay registration fees in full.** I/We agree to accept financial responsibility for Player's registration fees for the Travel Program. The first installment of \$350, this PWHC Registration Form, and a PWHC Credit Card Authorization are due before the player may participate in any PWHC Travel Program event. The remaining balance will be divided into 4 equal monthly payments due July 1st, August 1st, September 1st and October 1st, 2008. If the monthly installments are not paid when due, I/We understand that PWHC may charge my/our credit card for the amount due for that installment. I/We understand that a late fee of \$25 per month will be charged for all past due accounts. In addition, I/We understand that if Player's account is not paid in full by November 1, 2008, Player will not be eligible to participate in any PWHC event until Player's account is paid in full. I/We further understand that all registration fee discounts, (sibling discount, goalie discount, and refer-a-friend discount), are conditioned on Player's fees being paid in full by November 1, 2008, and that if Player's fees are not paid in full by November 1, 2008, I/We will forfeit any and all discounts and that the amount of these discounts will be added to the total amount due on Player's account.

\_\_\_\_\_ **Appointment of Agent / Acknowledgment of Risk / Release of Liability.** I/We appoint the representative or coach of PWHC as my/our agent for the purpose of authorizing medical attention in the event that the Player requires emergency medical attention while in the care of PWHC. I/We understand that participation in, and observation of, the sport of ice hockey constitutes a risk to the Player and observer of serious injury, including permanent paralysis or death. I/We, on behalf of myself/ourselves and/or the Player, voluntarily and knowingly accept and assume this risk and release PWHC and all duly elected, appointed, or recognized officers, volunteers, officials, affiliates, sponsors, and event organizers, from any and all liability arising from, or related to, any PWHC function.

\_\_\_\_\_ **Agreement to abide by all bylaws, guidelines, and policies.** I/We understand that the Player and my/our family represent PWHC when participating in PWHC events and agree to be bound by, and abide by, all USA Hockey Bylaws, Official Rules, Codes of Conduct, and Zero Tolerance Policies; PWHC Bylaws, Operational Guidelines, and Travel Program Guide; and other applicable policies. I certify that I am familiar with these documents and understand that PWHC will provide me with a copy of any of them upon request. I/We also agree and understand that one parent/guardian may be obligated to attend a Parent Education class as a condition of Player's participation in a PWHC program.

\_\_\_\_\_ **Optional contribution to PWHC Sponsorship Program.** I would like to make a tax deductible contribution to the PWHC Sponsorship program in the amount of \$ \_\_\_\_\_. Please add this amount to my registration invoice.

**Parent / Guardian Name (Player if 18) - Please Print** \_\_\_\_\_

**Parent / Guardian Signature (Player if 18)** \_\_\_\_\_ **Date** \_\_\_\_\_