

HOUSE PROGRAM BEGINS 10/05**TRAVEL PROGRAM BEGINS 09/05****NVHC 2005-2006 SEASON PROGRAM INFORMATION**

The Northern Virginia Hockey Club provides a quality hockey program for area youth of all ages and skills. NVHC is committed to providing an opportunity to learn and play the game of ice hockey in a competitive environment while promoting good sportsmanship and team play. NVHC is a member of USA Hockey and our travel teams skate in the Capital Beltway Hockey Leagues (CBHL). Our ice time is at the Mt. Vernon Ice Rink in Alexandria, VA, Ft. Dupont in Washington, D.C., and other rinks in the area.

PROGRAM DESCRIPTIONS

Program	Description	Eligibility	League Games	Non-League Games	Tournaments
Travel	Traditional travel; mid-week practices; weekend games; competitive play	Selected in open tryouts	20	12 or more	3 - 5 (at team discretion)
House	Weekend ice; skill development stressed	Open	In-house	Optional (CARL)	Optional
Mite Cross Ice	Weekend ice at Mt Vernon; skill development stressed	Open			
Initiation	10-week sessions/skates once a week.	Beginner			

The **HOUSE** program will begin in **October 2005**. The House Program is divided into age group teams (Mite, Squirt, Pee Wee, Bantam and Midget). Each age group is then divided into teams with an emphasis placed on organizing balanced teams. Assignments to the different levels of the House Program are based on age and skill level. House teams assignments are completed during October and will generally skate twice per week.

The **INITIATION** program is scheduled weekends only at the Mt. Vernon Ice Rink. The first 10-week session has not been scheduled as of this notice. NVHC encourages pre-registration, but walk-up registration will be available 30 minutes prior to the FIRST ice slot for each session. For more information, please see the NVHC web site and the club bulletin board (at Mt. Vernon) for updates to the schedule.

2005-2006 USA HOCKEY AGE DESIGNATIONS

Age Level	Birth Date Age Range	NVHC Travel Program	NVHC House Program	NVHC Initiation Program
Midgets	1987-1990	AA, A, B, Teams	Midget House	Not Available
Bantams	1991, 1992	A & B Teams	Bantam House	Not Available
PeeWees	1993, 1994	A & B Teams	Pee Wee House	1st year only
Squirts	1995, 1996	A & B Teams	Squirt House	Available
Mites	1997 and later	Not Available	Mite Cross Ice	Available

For Current Club Information and Directions Visit the NVHC WEBSITE often at:
[HTTP://WWW.NOVA-ICEDOGS.COM](http://www.nova-icedogs.com)

REGISTRATION BY MAIL FOR RETURNING MEMBERS:

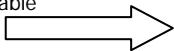
All Returning House Members in good standing and New Members may apply for membership by mail before **September 15, 2005** and be guaranteed membership for the **2005-2006** season. Enclosed is the NVHC 2005-2006 Season Registration Form. Fill out the form in its entirety.

Return the form with your NON-REFUNDABLE registration fee to:

NVHC Fall Registration
PO BOX 150215
Alexandria VA 22315

Registrations **MUST BE POSTMARKED NO LATER THAN September 15th, 2005** and the registration fee must be paid to be considered a returning member. Registrations postmarked after September 15th, 2005 may result in lapsed memberships. All fees will be applied to any previous uncollected fees. Your check will be cashed within ten business days and the canceled check will then serve as CONFIRMATION OF REGISTRATION. NVHC is not responsible for lost or misdirected mail. If there are any questions, please call your age representative.

2005-2006 HOUSE PROGRAM FEES AND PAYMENT SCHEDULE

Program and Total Fee	Registration Fee Due	First Payment Due 9/15/05	Final Payment Due 11/01/05
Initiation- \$150 per first 10 week session includes USA Hockey Registration	Pre-registration encouraged guaranteeing your slot. Walk-up registration 30 min ahead of first session (if available)	2 nd session and following are \$125.	
Mites X-Ice \$250 per 10 week session	See above		
House/Recreational Weekend Ice	Non-refundable 	\$400	\$400

*2005-2006 TRAVEL PROGRAM FEE SCHEDULE ***

Program and Total Fee	Registration Fee	Payment 2 Due 7/1/05	Payment 3 Due 9/1/05
Travel - \$1550	\$450 paid at spring tryouts	\$550	\$550
Squirt Transition Travel \$1050	As above	\$300	\$300

** New Payment Schedule

ALL FEES AND PAYMENTS ARE NON-REFUNDABLE

Members are responsible for paying ON TIME. A 10% late fee will be charged for all payments received after the final due date. ALL **HOUSE** team payments MUST be paid in full by **11/01/05**. ALL **TRAVEL** team payments are due by **09/01/05**. Members will not be permitted on the ice beyond these dates for practice or games unless all payments and penalties are paid.

FAMILY DISCOUNTS are available to families with more than one player. They apply to all programs **except** Initiation. Discounts are applied to the last payment due for the family and are calculated as follows: First player - full price; second player - 10% discount; other players - 20% discount with order of players based on highest to lowest total fees.

PLEASE KEEP THIS INFORMATION FOR FUTURE REFERENCE

EQUIPMENT REQUIRED

Proper equipment is essential for the safety of our members. NVHC supports the USA Hockey/CBHL guidelines for age appropriate equipment. Members are reminded that improper equipment is subject to penalty in all games and may be cause for dismissal from practice. The following equipment is required:

H.E.C.C. Approved Helmet (Full Face Mask)	Hockey Gloves	Cup & Support
Mouth-guard (colored)	Hockey Pants	2 Hockey Sticks
Shoulder Pads	Practice Jersey	Hockey Socks
Elbow Pads	Neck Protector	Hockey Skates
	Shin Pads	

2005-2006 BOARD OF DIRECTORS

YOUR PRIMARY CONTACT FOR ALL QUESTIONS IS YOUR AGE REP

Position	Name	Phone	Email
President	Jim Fullem	703-878-7504	jfullem2@yahoo.com
Vice President	John Rader	703-878-7504	john.rader@verizon.net
Secretary	Michelle Berberet	703-820-5923	Bermaher04@aol.com
Treasurer	Cindy Starr	703-921-0685	strconst@aol.com
House Director	Steve Murphy	202-686-1812	smurphy@reedsmith.com
Mite Age Rep	William Butler	703-549-4525	billbutler@comcast.net
Squirt Age Rep	Bill Dwyer	703-549-6535	julesbill@comcast.net
Pee Wee Age Rep	Leigh Dwyer	703-751-2273	dwyerfam@verizon.net
Bantam Age Rep	Bob Fischer	703-323-6084	bob.fischer@mail.house.gov
Midget Age Rep	Jeff Whiting	301-645-3254	jwhiting31051022@comcast.net

Other Key Volunteers

Registrar	Jim Alexander	703-591-2551	jbalexander1@msn.com
Club Scheduler	Ernie Harris		EHarrisDC@aol.com
CBHL Rep	Kirsten Fitrell	202-863-4438	kfitrell@ngs.org
Webmaster	Chris Solem	703-941-5869	Webmaster2005@nova-icedogs.com
Equipment Manager	Jeff Whiting	301-645-3254	jwhiting31051022@comcast.net
Merchandise Coordinator	Janet Smith	703-645-3254	hockeymom@virginiahockey.net
Marketing and Promotion	Jen Chastain	703-799-8778	Kinipela2@cox.net

YOUR PRIMARY CONTACT FOR ALL QUESTIONS IS YOUR AGE REP.

JOIN US FOR REGISTRATION/OPEN HOUSE Tuesday, June 14 from 6PM – 9PM during ICE DOG NIGHT at the Mt. Vernon Rec Center Ice Rink in Alexandria, VA. At that time, NVHC will offer a limited number of memberships on a first-come, first-served basis. Registration forms will be available and payment will be appreciated as we begin purchasing our fall/winter ice slots.

USED EQUIPMENT SALE and EXCHANGE will be held at the registration/open house on **JUNE 14**. Bring your equipment to the locker room area to set up. Please consider donating to the club any used equipment for our Initiation program. We need everything!

Please help us grow! We are looking for players for all programs-initiation, house and travel. If you have friends, neighbors, co-workers, family who might be interested, have them check out our web site or call a board member/age group coordinator for further information. Hockey is a great sport, please share it with others!

**NORTHERN VIRGINIA HOCKEY CLUB
2005-2006 FALL REGISTRATION FORM**

NOTE: REGISTRATION FEES ARE DUE AT TIME OF REGISTRATION AND ARE NON REFUNDABLE

Player Information

Last Name: _____ **First Name** _____ **Middle Initial:** _____

Birth Date: _____ Citizenship: _____ Gender: M or F (circle one)

Street Address: _____

City: _____ State: _____ Zip Code: _____ School: _____

Telephone: _____ Primary E-Mail: _____
(This will be used for all club communications)

Current High School Attended: _____

Program Requested:

Initiation House Mite Cross-Ice Travel Girls Are you a goalie? _____
Experience: Club _____ Years _____ Level _____

Parent or Legal Guardian Information:

Mother's Name: _____	Volunteer Coach or Asst. _____ Team Mgr _____
<i>Last Name</i>	<i>First Name</i>

Phone Number: _____ Work Number: _____ E-Mail: _____

Father's Name: _____	Volunteer Coach or Asst. _____ Team Mgr _____
<i>Last Name</i>	<i>First Name</i>

Phone Number: _____ Work Number: _____ E-Mail: _____

Insurance Information and Treatment Waiver

Company _____ Policy Group Number _____
 Policy Holder _____ Coverage Restrictions? Yes No
 Family Doctor _____ Phone () _____
 Special Medical Information: _____

All Parents/Guardians of Players under the Age of 18 Must Sign Before the Player May Participate

I, the Parent/Guardian of the above-identified player, appoint an acting representative of NVHC my agent for the purpose of authorizing emergency medical treatment of said player any time he/she is injured when I am not available. I indemnify the agent from all costs and/or liability arising from said treatment.

X _____
 Signature of Parent/Guardian _____ Date _____

Waiver of Liability - I/We agree to abide by the rules and regulations of USA Hockey, the Capital Beltway Hockey League and my individual Club. The undersigned hereby gives permission for his/her child to participate in the athletic program sponsored by the Capital Beltway Hockey League (CBHL), and the individual Club. It is understood that the CBHL and Club are nonprofit, volunteer organizations which sponsor this program as a community service and are not responsible for expenses or damages resulting from injury from participants which are sustained in conjunction with or incidental to a CBHL/Club sanctioned activity. Accordingly, the undersigned HEREBY EXPRESSLY AGREES to waive all claims against, and hold exempt from liability, the CBHL/Club, its officers, directors, coaches and any other person affiliated with the CBHL/Club, for injury or injuries sustained by the above-referenced child, from whatever cause, while attending, participating in, or traveling to or from club activities.

Payment of Fees - NVHC programs are funded entirely by program fees. The undersigned accepts responsibility to pay such fees when due. A 10% late fee will be charged for all payments received after the final due date. In the interest of fairness, the Club reserves the right to suspend a member, whose fees are not paid on a timely basis, until such delinquent fees and any associated late penalty, have been paid in full. Upon failure to make payment when due, and should this demand for payment be turned over for collection, the undersigned shall pay all reasonable legal fees and costs of collection. **ALL FEES ARE NON-REFUNDABLE!**

X _____
 of Parent/Guardian _____ Date _____ Signature _____

For Club Use Only	CK#	Cash	Amt.	Date Received:	Age Level
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