

NORTHERN VIRGINIA HOCKEY CLUB

2003-2004 REGULAR SEASON 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: _____ E-Mail: _____

Program Requested:

Initiation House Mite Cross-Ice Travel Midget HSC Are you a goalie? _____

Experience: Club _____ Years _____ Level _____

Parent or Legal Guardian Information:

Mother's Name: _____ Volunteer Coach or Asst. _____ Team Mgr _____

Last Name

First Name

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

Father's Name: _____ Volunteer Coach or Asst. _____ Team Mgr _____

Last Name

First Name

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 _____
Signature of Parent/Guardian Date

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