

**Vernon Youth Hockey**  
Po box 680, McAfee, NJ 07428  
www.vernonyouthhockey.com

**Participant Registration Form Fall/Winter 2009/2010**

Player Name \_\_\_\_\_ DOB \_\_\_\_\_

Parent(s)Guardian \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ zip code \_\_\_\_\_

Phone \_\_\_\_\_ Mother cell \_\_\_\_\_ Father cell \_\_\_\_\_

email \_\_\_\_\_

**Fall/Winter League Outline:** Each team will play a minimum of 14 games and 22 practices plus playoffs. All practices and games will be held at Skylands Ice World. Game jerseys and socks are not included in the registration cost. All players must be registered with USA hockey. USA registration must be renewed each year and is the players responsibility.

**Mite** (2001 & younger) \$650 \_\_\_\_\_ **Squirt** (2000 & 1999) \$700 \_\_\_\_\_

**Pee Wee** (1998 & 1997) \$775 \_\_\_\_\_

**Middle School** (1997,1996&1995) # of games, practices and reg. fee TBD \_\_\_\_\_

**\$200 due at registration \$200 due before Sept. 15, 2009 balance due Nov 1, 2009**

**Sibling Discount \$25 Total Due** \_\_\_\_\_

**Payment 1** \_\_\_\_\_ **Date** \_\_\_\_\_ **Payment 2** \_\_\_\_\_ **Date** \_\_\_\_\_ **Payment 3** \_\_\_\_\_ **Date** \_\_\_\_\_

**Waiver**

Due to USA Hockey rules and insurance regulations, a player will **not** be permitted to participate in the VYH program before his/her signed registration form, a copy of his/her birth certificate, and full payment are received.

I agree to abide by all the rules and regulations established by USA Hockey. I will provide all necessary safety equipment. I hereby release from liability the coaches, managers, board members, sponsors and participants for any mishaps, accidents or injuries incurred as a result of participation or transportation to and/or from any activity. I agree that if an injury or accident occurs, I will seek recovery from my own insurance company.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

