

2010 Winter League Inline Hockey Season Registration Form

DEADLINE: January 5, 2010

Please print CLEARLY

Player Name _____ Age _____ DOB _____

Mailing Address _____
City _____ Zip _____

Phone Numbers _____
Home _____ Work _____ Cell _____

Parents' Names _____ Email _____

In Case of Emergency CONTACT _____ Phone _____

EXPERIENCE

PLEASE indicate if you would like to play **GOALIE** for a team this season: YES NO

Check which applies to the player:

Hockey: Never played before _____ Beginner _____ Intermediate _____ Advanced _____

Skating ability: Beginner _____ Intermediate _____ Advanced _____

Years played inline hockey _____ ice hockey _____

INDEMNIFICATION AGREEMENT

In consideration of using the related skating facilities for activities associated with the season, I hereby agree that JellyBeans, including, but not limited to, the owners, agents, employees, and any persons engaged as administrators of this Youth Inline Hockey League, to indemnify and hold harmless each and everyone of the above mentioned from and against all claims, liability, loss, damage, and any expenses which may arise out of, or in connection with my use of said facilities.

WAIVER OF LIABILITY AND MEDICAL TREATMENT AUTHORIZATION

This undersigned understands that inline hockey is a rough and fast paced sport. This sport has related risk for serious physical injury, including possible death, which risk is hereby voluntarily assumed. In consideration for the participant's acceptance into the 2010 Winter Inline Hockey League Season, the undersigned does hereby release and forever discharge all entities/persons affiliated with these functions including, but not limited to, the WIHA Staff/JellyBeans Staff from any and all claims for injury or damages which may be the foregoing entities/persons harmless for such claims by or on behalf of the participant arising now or in the future. The undersigned hereby certifies that to the best of his knowledge and belief, that the participant is in good physical condition and has no disease or injury that will aggravate or cause harm to the participant or others. In case of any emergency or injury, I hereby authorize the WIHA or JellyBeans staff and/or designated employees or agents to seek medical attention for the participant. All related costs will be paid by participant and/or guardian.

RELEASE FOR INTERNET USE

I give permission for my child's photo to be used on the WIHA website or any hockey related materials. Yes _____ No _____

CODE OF ETHICS

The undersigned (player & parent) agrees to adhere to the following Code of Ethics while participating in the season's activities:
1-Maintain self-control at all times 2-Show respect to opponents 3-Support your team in a positive manner 4-Recognize and acknowledge good performance by all teams and individuals 5-Be humble in victory and gracious in defeat 6-Unsportsmanlike conduct on the part of players, coaches, or spectators will not be tolerated-This includes: a-Taunting, trash talking, or ridicule b-Profanity, racial or sexist remarks or obscene gestures c-Fighting or physical abuse d-Destruction of property.

If we all work together for a positive environment for our games, we can promote good sportsmanship and healthy competition for all our players.

I am in agreement to the above set rules and regulations and will adhere to them.

Parent signature _____ Player signature _____ Date _____

Registration Fee **\$125 Paid** _____ By: **Cash, Ck#** _____ Received by _____

Sibling \$80 Late Registration \$135 if received after Jan. 5th, 2010 Diamond : \$80