



Adult Hockey Leagues Individual Registration (house team)

Phone: 616-538-5066
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Spring 2016 (Feb-Apr) Summer 2016 (May-Jul) Fall 2016 (Aug-Oct) Winter 2016 (Nov-Jan)

Player Name: _____ Sex: _____ Age: _____ Date of Birth: _____

Parents Names (if U18): _____ Email: _____

Address: _____ City: _____ Zip: _____

Home Ph: _____ Cell Ph: _____

Place on team with: _____ Referred by: _____

Position: Forward Defense Forward/Defense Goalie Doesn't Matter Experience (years): _____ Inline _____ Ice _____

DIVISION	DAYS
<input type="checkbox"/> Division 4 – Beginner	Tuesday / Wednesday
<input type="checkbox"/> Division 3 – Intermediate	Tuesday / Wednesday
<input type="checkbox"/> Division 2 – Intermediate	Monday
<input type="checkbox"/> Division 1 – Advanced	Monday
*Specific playing days and/or times are <u>not guaranteed</u> . We will attempt to accommodate as many special scheduling requests as possible.	

REQUIRED EQUIPMENT	APPLIES TO
Helmet designed for hockey (HECC certified). Helmets must be worn while on the rink or benches.	All players and goaltenders
Hockey gloves (with palms)	All players
Shin Guards (with knee protection). Shin guards must be covered with pants or hockey socks.	All players
Elbow pads (must be covered at least to the point of the elbow by the jersey sleeves)	All players
Jersey (with permanent number). All players on each team must wear similar colored jerseys.	All players
Full face mask or full shield	Players u18
Inline Skates <u>without</u> brakes (preferably hockey skates)	All players
*Mouth guards and facial protection are recommended for all players	

League Fees: \$130 per season (\$120 if paid in full by the day of first game). A \$30 deposit is due at time of registration for all new players. A "new player" is one that did not play and pay on a team at Rivertown Sports during the previous season. The \$30 deposit will be subtracted from the player's LAST scheduled payment of the season. Full league fees are due and no refunds will be issued to players that withdraw after schedules are published.

Payment Schedule for players not making full payment by the day of their first game: 25% (\$32.50) due prior to the first game, 50% (\$65.00) due prior to the third game, 75% (\$97.50) due prior to the fifth game and 100% (\$130.00) due prior to the seventh game. Players behind in payments will not be allowed to play until up to schedule. A \$25.00 fee will be charged on all returned checks. \$5.00 fee may be charged for each late week.

Proof of Age & Sign-in: Players must be at least 16 years of age to participate in adult hockey leagues. Proof of age must be provided upon request. Players must play in at least five (5) games to be eligible for playoffs. **All players are required to sign-in at the rink office prior to each game.**

Rules: All games are played using the Official Rules of USA Hockey Inline with additional house rules. It is each player's responsibility to know the rules. It is not the referee's responsibility to explain the rules. Rulebooks are available at the rink and are posted on the web site.

Participant and/or legal guardian(s) of participant (hereafter participant) acknowledge, understand and assume all risks inherent in sports activities and understand that said sports and activities involve risks to participant's person including bodily injury, partial or total disability, paralysis, and death, and damages which may arise therefrom and that I/we have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant or the negligence of others, including the "releasees" identified below. It is further acknowledged that there may be risks and dangers not known or are not foreseeable at this time. Participant acknowledges, understands and assumes the risks, if any, arising from the conditions and use of sports facilities and related premises and acknowledges that included within the scope of this waiver and release is any cause of action, arising from the performance, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said rinks, for negligent selection of certain releasees, or negligent supervision or instruction by releasees. Participant agrees if any claim for participant's personal injury or wrongful death is commenced against releasees, he/she shall defend, indemnify and save harmless releasees from any and all claims or causes of action by whomever of wherever made or presented for participant's personal injuries, property damage or wrongful death. It is the purpose of this agreement to exempt, waive and relieve releases from liability for personal injury, property damage, and wrongful death caused by negligence, including the negligence, if any, of releasees. "Releasees" include Rivertown Sports Management, LLC, other participants, event hosts, coaches, officials, sponsors, advertisers, owners, and operators of the premises used to conduct any event and each of them, their officers, directors, agents and employees. Participant acknowledges that they have been provided and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers of sports activities and understand these waivers and releases are necessary to allow recreational sports to exist. Participant acknowledges that audio and/or video recording equipment may be in use at any time and that no expectation of privacy should exist inside the facility and/or on the outside premises. In addition, participant hereby permit Rivertown Sports to make and/or use, in whole or in part, photographs, videos, written extractions, and voice recordings of the participant, without enumeration, for whatever reason, including but not limited to; promotional or training materials, security evidence, retail products, etc. At its sole discretion, Rivertown Sports may issue refunds or credits.

Participant acknowledges that they are entering into a contract that requires payment as stated above.

Player Signature: _____ **Date:** _____

DO NOT WRITE BELOW THIS LINE -- OFFICE USE ONLY

Amount Paid - \$ _____ Date Paid: _____ Cash _____ Check _____ Credit Card _____ Debit _____ Revised: 01/20/14