



Spring/Summer Program 2019

For current Pelham PW/Bantam/Modified/JV/Varsity

Program fee: \$750/Player

- 25 – 1 Hour Skills Sessions, which run from April through mid August
Conducted by top coaches including former NHL scout, College and Prep coach Frank Effinger, Power skating coach Pete Cathone and former European player and top goaltending coach, Miro Recicar
- A roster spot on a Spring team (team to be determined by Coaching Staff)
- 12-15 spring league games and associated practices

PeeWee•Bantam•Modified Skills Sessions

Wednesdays 6:00 – 7:00pm 4/3 – 6/12

Sundays 12:20 – 1:20pm 4/7 – 8/18

No sessions on 4/10, 4/21, 5/12, 5/26, 5/29, 7/7

Varsity Level Skills Sessions

Wednesdays 7:10 – 8:10pm 4/3 – 6/12

Sundays 1:30 – 2:30pm 4/7 – 8/18

No sessions on 4/10, 4/21, 5/12, 5/26, 5/29, 7/7

About the Spring League Teams

The Ice Hutch will field a Pelham based Bantam and a Pelham based Varsity level team. These teams will play in the Ice Hutch Spring League which runs from April through June. These teams are not affiliated or controlled by the Pelham Hockey Association. The Bantam level team is for current peewees and 7th and 8th graders; some 8th graders may be called up either part time or permanently to the varsity level team at the coaches' discretion. The varsity level team will be comprised of the returning varsity players, current juniors, sophomores and freshman, and possibly 8th graders, again based on coaches' discretion. The league does not allow seniors.

Please fill out form, sign waiver on REVERSE SIDE and mail with payment to above address.

Name _____ Level _____

Register for the Level of 2019-2020 Season

Phone _____ Email _____

PAYMENT: Make checks payable to the Ice Hutch or you may use a major credit card

Card # _____ Exp. _____ CVV _____

Signature _____ Date _____

Office

Rcvd _____ By _____

Paid _____ # _____

Roster _____

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in this Ice Hutch Sound Shore Ice Hockey Program/League and all future programs and related events and activities, the undersigned: 1. Acknowledges and fully understands that each participant will be engaging in activities that involve risks of serious injury including death or paralysis which might result from their own actions, inaction's or negligence of others, the rules of play, or the condition of the premises or any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at the time. 2. Assume all of the foregoing risks and accept personal responsibility for the damages following such injury. 3. Release, waiver, discharge, agree to hold harmless and covenant not to sue Ice Hutch Rink, Sound Shore Ice Hockey Program/League, its affiliated Clubs, Their respective administrators, directors, agents, coaches and other employees of the Organization, other participants, sponsors, and if applicable, owners and lessees of the premises used to conduct the event, all of which are hereinafter referred to as "releasees", from demands, losses or damages on account of injury caused or alleged to be caused in whole or in part by the ordinary negligence of the releasees or otherwise. I agree that if any portion of this waiver & release is held invalid, the balance shall, notwithstanding, continue in full legal force & effect. 4. I agree I shall provide health insurance or other applicable insurance to cover any personal injury and property damage sustained by the participant while participating in the activities of the Ice Hutch Rink, and that in consideration services provided in connection with this ice skating program. 5. In the event of an accident or illness, the facility has my permission to provide emergency first aid care. The Ice Hutch Rink and the Ice Hutch Sound Shore Spring League are not responsible for broken, lost equipment or other expenses incurred while participating at the Rink.

THE UNDERSIGNED HAS READ THE ABOVE WAIVER AND RELEASE, UNDERSTOOD THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY. **I UNDERSTAND THERE IS NOMEDICAL OR ACCIDENT INSURANCE PROVIDED.**

Parents Name (please print): _____

Parents Signature: _____

Players Name: _____

Address: _____ City _____

State: _____ Zip Code: _____ Phone #: _____

Grade: _____ Email Address: _____