

2008 SPLIT SEASON 'UPPER VALLEY' MIDGET MINOR REGISTRATION
Sponsored by Hanover Hockey Association

Player Name: _____ Circle Birth Year (1992 1993)

2006 – 2007 Team & Level: _____

Contact Information:

Preferred Email Contact Information: _____

Secondary Email Contact Information: _____

Address: _____

Telephone: _____

Fees: *A fee of \$450 will be charged to all participants (\$350 for goalies). A nonrefundable deposit of \$40 is due at or prior to the commencement of tryouts, along with proof of 2007-2008 USA Hockey Registration. Players will not be allowed on the ice until the tryout fee is fully paid. In order to hold spot on team, a Reservation Fee of \$185 shall be paid (in addition to the Tryout Fee). The Reservation Fee is due on or prior to April 15, 2008. Final payment shall be required on or prior to August 1, 2008. No player shall be allowed to practice until such time as the full payment has been made. Checks should be mailed to Jay Wolter, Split Season Hockey Director, Hanover Hockey Association, P.O. Box 325, Orford, N.H. 03777.*

Tryout Fee:	Check # _____	Amount \$ _____	Rec'd _____
Reserv. Fee:	Check # _____	Amount \$ _____	Rec'd _____
Final Pay:	Check # _____	Amount \$ _____	Rec'd _____

- Unpaid fees from prior seasons must be paid to HHA, LYHA or HYHA before first practice
- Make your check(s) out to Hanover Hockey Association

HANOVER HOCKEY LIABILITY RELEASE

I understand and appreciate that the risk of injury from hockey is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist. By my/my child's participating I KNOWINGLY ASSUME ALL SUCH RISKS, both known and unknown. Further, I have read, understand, and agree to Waiver of Liability, Release and Indemnity Agreement and confirm that the absence of my signature on that form is due only to administrative facilitation of my/my child's registration. The undersigned also understands that the Hanover Hockey Association, the Hanover Improvement Society, and Dartmouth College assume no responsibility for property loss, damage, or personal injury to the above arising directly or indirectly from participation in the Hanover Hockey Program. The undersigned assumes all risks and dangers incident to participation in the Hanover Hockey Program and arising out of use of the James W. Campion Rink, Thompson Arena and other facilities that may be used during the program.

Signature of Player: _____ Date: _____

Signature of Parent: _____ Date: _____

All players must be USA Hockey Registered Prior to Tryouts. For players who did not participate in HHA programs during the 2007-2008 season, proof shall be required at the tryout. Players shall also be required to register for the 2008-2009 season prior to the commencement of play in August.

PLEASE MONITOR THE HHA WEBSITE, WWW.HANOVERHOCKEY.ORG, FOR PERIODIC UPDATES DURING THE SPRING AND SUMMER. TRYOUT DATES AND TIMES TO BE POSTED AT HARTFORD AND CAMPION RINK. THEY ARE CURRENTLY SCHEDULED FOR WEEK OF MARCH 16.