

2011-12 Fall/Winter House League Registration

CURRENT CAHA MEMBER PRE-REGISTRATION AND \$100.00 DEPOSIT DUE JUNE 1, 2011. OPEN REGISTRATION BEGINS JUNE 2, 2011.

Ice Den · 9375 E. Bell Rd., Suite 101 · Scottsdale, AZ 85260 · 480-473-5808 · FAX: 480-585-9117 · www.coyotesice.com

Player's Name: _____ Male
Female

Address: _____ City: _____ St: _____ Zip: _____

Home # _____ Wk# _____ Mandatory Cell# _____

Emergency # _____ Emergency Contact: _____

Mandatory Email: _____ Date of Birth: ____/____/____

Father's Name: _____ Mother's Name: _____

Do you have medical insurance? Yes No Company: _____ Policy #: _____

Have you registered with USA Hockey for 11/12 season AND submitted registration to CAHA? Yes No

2011-12 FALL/WINTER HOUSE LEAGUE DIVISIONS/POSITIONS



Please check "✓" the box corresponding to the age division in which you are registering

MINI-MITE 05, 06 Birth year _____

MITE 03, 04 Birth year _____

SQUIRT 01, 02 Birth year _____

PEEWEE 99, 00 Birth year _____

BANTAM / MIDGET* Birth year _____

96, 97, 98

*1st-year Midgets are permitted to register in the Bantam/Midget division

Preferred Position:

Forward Defense

Goaltender

PAYMENT OPTIONS FOR 2011-12 SEASON

PAY IN FULL:

MINI-MITES \$559⁰⁰ MITES - BANTAM/MIDGET \$799⁰⁰

CREDIT CARD PAYMENT PLAN:

MINI-MITES MITES - BANTAM / MIDGET

\$100 due at registration

\$229.50 charged Aug. 1, 2011

\$229.50 charged Sept. 1, 2011

\$100 due at registration

\$349.50 charged Aug. 1, 2011

\$349.50 charged Sept. 1, 2011

*Your credit card number on the back of this form will be kept on file and will automatically be charged for the above referenced payments. A valid credit card must be submitted for the Payment Plan option. **NO POST-DATED CHECKS WILL BE ACCEPTED.**

Schedules to be posted on Pointstreak.com
Online registration available at www.coyotesice.com
Payment plan options not available via online

Release:

In consideration of being permitted to participate in hockey and skating related activities at the Ice Den, I agree to the following:

I understand and appreciate that, there are risks of serious personal injury in connection with participation and voluntarily assume and accept those risks. I unconditionally release, waive and covenant not to sue Coyotes Amateur Hockey Association ("CAHA"), Coyotes Ice, LLC ("Ice Den"), and any of their affiliates and subsidiaries, their promotional sponsors and advertisers and all their agents, servants and employees from any and all suits, claims, and demands of any kind for personal injuries, property damage, including but not limited to lost or stolen goods, that I may sustain while participating in hockey, skating and all related activities. I hereby give my consent to the CAHA and Coyotes Ice, LLC to use my image/likeness (or in the case of a child...my child's image/likeness) for the purpose of inclusion in any publication related to the CAHA, the Ice Den or the Phoenix Coyotes Hockey Club.


CONSENT TO TREAT: I certify that as parent or guardian of said participant, I give my consent to Ice Den and its staff to obtain medical care from any licensed physician, hospital, or clinic for said participant, for any injury that could arise from participation of any activities at Ice Den.

Signature: _____ Date: _____
(Parent or Guardian if participant is under 18 years of age)

Cancellation Policy:

No refunds will be given to a registrant who leaves because of their own desire or fails to attend. The only exception being a major medical problem affecting the registrant accompanied by a physician's note.

Players must register annually with USA Hockey to be eligible to play. Visit www.usahockey.com and click the Register Online box. Once registered, please email your confirmation page to Tommy Hess at thess@coyotesice.com no later than September 1, 2011



A NON-REFUNDABLE DOWNPAYMENT OF \$100.00 MUST BE ATTACHED TO THIS FORM. THE REMAINING REGISTRATION FEES ARE DUE AS STATED BELOW:

Cash Check # _____

Visa AmEx MC Card DC Card #: _____ Exp. date: _____ CVC Code: _____

Your credit card number at the bottom of this form will be kept on file and will automatically be charged for the above referenced payments. A valid credit card must be submitted for the Payment Plan option. NO POST-DATED CHECKS WILL BE ACCEPTED.

Cardholder signature authorizing processing payment: _____

Make checks payable to: CAHA

All checks will be processed electronically in accordance with the "Check 21" law.

Mite - Bantam/Midget: \$349.50 DUE AUGUST 1, 2011, \$349.50 DUE SEPTEMBER 1, 2011

Mini-Mites: \$229.50 DUE AUGUST 1, 2011, \$229.50 DUE SEPTEMBER 1, 2011

For CAHA office only: Date received: _____ By: _____