

Youth Inline Hockey Registration Form

This form may be duplicated. One person per registration form.
 Full payment is due at time of registration for all Murrysville Dek
 Hockey programs. Register On-Line @ www.padekhockey.com
 Make check out to Murrysville Dek Hockey LLC
 Mail form and check to Murrysville Dek Hockey
 4491 School Road South; Export, PA 15632

Office Use Only--

Date received - ____/____/____, 2011

By - _____

Check # ____ / CC Type ____ / Cash ____

Waiver on File: ____ Waiver Signed: ____

Participant Name _____ Male ____ Female ____ Jersey Size Y / A _____

Street Address _____

City _____ Zip Code _____ Grade _____ Date of Birth ____/____/____

Note: Age Eligibility Cut-Off will be June 10th for ALL AGES

Parent's Name (if participant is under age 18) _____

Home Phone _____ Daytime Phone _____

Emergency Contact _____ Emergency Phone _____

YRS OF EXPERIENCE: _____ **E-mail Address:** _____

PLEASE CIRCLE FOR GOALIE: Full Time Part Time Like to Try No Goalie

Session	Please Circle Age		Program Fee
SEASON II	10 & UNDER	11 – 15 YRS	\$ 95.00

TOTAL FEE INCLUDED \$ _____

The undersigned individual (parent, guardian, or student) represents that the registrant is in good health and can participate in the above-listed activity, and with prior knowledge of the physical nature of the activity, releases Murrysville Dek Hockey, LLC from any and all responsibility for injury to the registrant through negligence or otherwise while he/she is participating in the activity. The parent, guardian, or participant assumes all risks inherent in the activity and will hold Murrysville Dek Hockey, LLC along with other program facilities harmless from any and all claims or causes of action that may arise from this activity. The undersigned individual also hereby gives permission to Murrysville Dek Hockey, LLC to use photographs of the participant for the promotion of programs and events. The participant agrees to hold Murrysville Dek Hockey LLC and Murrysville SportZone free and harmless from any liability of any nature.

PARENT/GUARDIAN SIGNATURE REQUIRED:

Date ____/____/2011