



Twin Rinks Adult Hockey League BRONZE LEAGUE Fall/Winter 2010 Season July 18, 2010 – January 2011

Bronze League

- For individuals with limited hockey experience (normally less than 4 years) who are looking to play hockey as an enjoyable, leisure activity.
- No Checking allowed and full equipment is required. (Full cage as well.)
- Referees will be instructed to call a tighter game which should provide a less physical game.
- Game ejection plus 1 game for players receiving their third penalty in one game.
- Normally 1 game each week. Games mostly on Sun., Mon., Tue. some Wed. Thu., Fri., Sat. games.
- Start times weekdays between 7:00–10:40 pm, Sat between noon and 7pm, Sun between noon and 10:40pm
- Early Bird teams all games (except playoffs) will start before 9:16pm. (Early team may have 13 players)
- **27 games**, including playoffs - 15 minute stop-time periods.
- 2 players may register and be drafted together on the same team. Both players should note this on their forms.
- Players will be placed on teams by a draft. Maximum 13 skaters plus 1 goalie per team. Players who register after the draft will be placed on any team other than the team played on during the previous season.
- Captains and up to 4 other players form the team core.
- Captains meeting Wednesday July 14 at 7:30 pm to do the draft.

New Players

New players will be evaluated by league captains and rink management. At any time a new player may be *promoted* out of the league. A full refund less a pro-rated per game fee less jersey cost will be given.

Substitution Policy

Substitutions are now done online. Go to www.twinrinks.com click on adult hockey then Adult Hockey Signin. Your email is your login. First time in there is no password. Fill out your profile and then update the games you will be playing in and the games you can sub in throughout the season. Player substitutions will be made only if a team will not be able to field 10 skaters for a game. Substitute players will be assigned by Twin Rinks via email. Failure to comply with the Sub Policy will result in a forfeit.

FEES before or on 7-14-10 (27 games)

League Fee Full Pay \$538.00. Click here to register → https://www.twinrinks.com/bronze_secure_form.htm

League Fee Payment Plan \$281.50 now and \$281.50 in 60 days

Click here to register → https://www.twinrinks.com/bronze_secure_formpp.htm

Early Bird League Fee Full Pay \$767.50. Click here to register → https://www.twinrinks.com/bronzee_secure_form.htm

Early Bird League Fee Payment Plan \$396.25 now and \$396.25 in 60 days

Click here to register → https://www.twinrinks.com/bronzee_secure_formpp.htm

Discount -\$80 if register in the new Rec Silver League

Want to play twice a week?
Play on 2 Bronze Teams.
Cost for 2nd team is \$25 plus \$17.00
for each non-conflict game.

TWIN RINKS BRONZE LEAGUE REGISTRATION FORM

Players Name: _____ Birth Date: ___/___/___ Sex: M F
Address: _____ City: _____ Zip: _____
Home Telephone: _____ Cell Telephone: _____
Emergency Telephone: _____ Email _____

I had fun playing with my team last session, but would like to make new friends.

Check here if you want to change teams.

FEES before or on 7-14-10 (27 games)

- 1 payment of \$538.00 (RECB-INDI 07-18-10)
 2 payments of \$281.50. 1st payment due now, 2nd payment will be charged to credit card on 09-15-10.

FEES after 7-14-10 (27 games)

(must fill out credit card info below)

- 1 payment of \$592.00 (RECB-INDI 07-18-10)
 2 payments of \$308.50. 1st payment due now, 2nd payment will be charged to credit card on 09-15-10.
(must fill out credit card info below)

Early Bird Team before or on 7-14-10 (27 games)

- 1 payment of \$767.50 (BRON-EARL 07-18-10)
 2 payments of \$396.25. 1st payment due now, 2nd payment will be charged to credit card on 09-15-10.

Early Bird Team after 7-14-10 (27 games)

(must fill out credit card info below)

- 1 payment of \$821.50 (BRON-EARL 07-18-10)
 2 payments of \$423.25. 1st payment due now, 2nd payment will be charged to credit card on 09-15-10.
(must fill out credit card info below)

+\$11.50 matching socks pre-ordered. \$15 at the door. (RECB-SOCK 07-18-10)

-\$80 if registered in the new Rec Silver League

+\$250 2nd Bronze team deposit, balance will be known after the draft.

Goalies: \$135 (RECB-GOAL 07-18-10) \$150 includes jersey

All players must register and pay USA Hockey at www.usahockeyregistration.com and bring us the confirmation form.

Waiver and Release of All Claims

Please read this form carefully and be aware that in signing this Waiver and Release of All Claims you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of this and all future activities at Twin Rinks Ice Pavilion, Inc.

"I recognize and acknowledge that there are certain risks of serious injury to participants in this activity and I agree to assume the full risk of any injuries, damages or loss regardless of severity which I or my child/ward may sustain arising out of this and all future activities. I agree to waive and relinquish all claims I or my child/ward may have arising out of this and all future activities against Twin Rinks Ice Pavilion, Inc. and its officers, directors, shareholders, agents, servants, and employees. I do hereby fully release and discharge Twin Rinks Ice Pavilion, Inc. and its officers, directors, shareholders, agents, servants, and employees from any and all claims from injuries, damages or loss which I or my child/ward may have or which may accrue to me or my child/ward arising out of this and all future activities. I further agree to indemnify and hold harmless and defend Twin Rinks Ice Pavilion, Inc. and its officers, directors, shareholders, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or my child/ward, arising out of, connected with, or in any way associated with this and all future activities. In the event of an emergency, I authorize Twin Rinks Ice Pavilion, Inc's. officials to secure from any licensed hospital, physician and/or medical personnel any treatment deemed necessary for me or my child/ward's immediate care and agree that I will be responsible for full payment of any and all medical services rendered".

Refund Policy prior to the first day: Payment Plan: No refunds. **Full Payment:** 75% refund less a \$10 administrative fee.

Refund Policy on or after the first day: Payment Plan: No refunds. Upon notification of cancellation the entire unpaid balance will immediately become due and will be charged to the credit card. **Full Payment:** 50% refund less a pro-rated per game fee for each game that has taken place up to the date of notification, less jersey cost.

I have read and fully understand the above program details, payment requirements and waiver and release of all claims.

I agree to pay the credit card charges charged to the following credit card:

Discover MC Visa _____ CVVC _____ Expires ___/___/___

Signature _____ Date _____