



# INSTRUCTIONAL ADULT LEAGUE

## Twin Rinks Adult Hockey League

### Spring/Summer 2012 Season

#### INSTRUCTIONAL ADULT HOCKEY

January 22, 2012 – July 1, 2012

Instructional Adult Hockey is designed for those individuals with minimal or no previous hockey experience who want to develop their skills and learn to play the game. Program emphasis is to teach the basic skills and concepts of hockey: Skating, Stickhandling, Shooting, Passing and Positioning. The sessions will be divided between training and scrimmage. Sunday nights at 8:50pm to 10:20pm.

- No checking - Full equipment required (Full cage as well)
- **23 Week Session.**
- All players must register and pay USA Hockey at [www.usahockeyregistration.com](http://www.usahockeyregistration.com) and bring us the confirmation form.

#### INSTRUCTIONAL ADULT HOCKEY REGISTRATION FORM

Click here to register online-full pay → [www.twinrinks.com/inst-indi.htm](http://www.twinrinks.com/inst-indi.htm)

Click here to register online-payment plan → [www.twinrinks.com/inst-indi-pp.htm](http://www.twinrinks.com/inst-indi-pp.htm)

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

#### FEES on or before 01-15-12 (23 sessions)

- 1 payment of \$519.50 (INST-INDI 01-22-12)
- 2 payments of \$272.25. 1<sup>st</sup> payment due now, 2<sup>nd</sup> payment will be charged to credit card below on 03-22-12.

#### FEES after 01-15-12 (23 sessions)

- 1 payment of \$565.50 (INST-INDI 01-22-12)
- 2 payments of \$295.25. 1<sup>st</sup> payment due now, 2<sup>nd</sup> payment will be charged to credit card below on 03-22-12.

Matching socks available when you pick up your jersey. \$15 cash only

- \$180 locker rental for entire season (NLOCKER-A)
- \$75 if registered in the new Leisure League

Goalies:  \$156 (jersey available at first class, \$15 cash only)

- Single session must be pre-approved by [kayne@twinrinks.com](mailto:kayne@twinrinks.com) cost \$35, date skating \_\_\_/\_\_\_/\_\_\_

#### 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 class fee for each class 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 \_\_\_\_\_