



United Sports Training Center DEK Hockey 2007 10 Game Winter League

League Dates: December 20, 2007 – March 6, 2007

Player Information: PLEASE PRINT

Team: _____

Player name: First _____ Last _____ Birthdate: ____/____/____ Age: ____ Gender: M F
Year Month Day

Address: _____ Parent/Guardian Name _____

City: _____ State _____ Zip _____ Parent/Guardian D.O.B. ____/____/____ (year/month/day)

Day -Phone: _____ Evening Phone: _____ Emergency Phone: _____

Primary Email **(Mandatory)**: _____

Playing Experience: _____

If currently a United Sports Member check this box: Membership #: _____ Exp Date: _____

Release of Liability Clauses:
 I hereby release and discharge United Sports Training Center ("USTC"), its agents, employees, staff members, directors, and officers from any claims, responsibilities or liabilities for injuries or harm incurred as a result of my participation and/or my child's participation at USTC. I authorize USTC, its agents, employees, staff members, directors, and officers to take whatever action necessary, in their best judgment, in an emergency and I hereby release and discharge USTC, its agents, employees, staff members, directors, and officers from any responsibility or liability related thereto. I hereby grant USTC permission to use my and/or my child's name, picture or likeness in any printed media or any form of advertisement. I fully renounce any and all claims upon USTC for reimbursement for use of this material.

Participant Name: _____ Parent/Guardian Signature: _____ Date ____/____/____

Fees:
\$75 Member
\$90 Non-Member
(minimum of 8 Players per team)

Teams are responsible for referee fees of \$10 per game.

**A Late Fee of \$25 will be added
 if not paid before the 1st game of the league.**

Individual Sign up Fees (Please check correct box)

- (member) \$75.00
- (non-member) \$90.00

Rules

- * The season will consist of **10 games** plus playoffs
- * All Games will be played on our 120'x 60' rink
- * Games will be 3 – 15 minute periods
- * 4 on 4 plus goalies
- * Games will be played on **Wednesdays or Thursdays**

Payment Information:

Please circle card type:   Exp: _____
 Amount: _____

Credit Card #: _____

Cardholder Signature: _____

Check # _____ Cash: _____

Cash or Check Amount: _____

All checks should be made payable to "USTC" and mailed to:
 United Sports Training Center
 1426 Marshallton-Thorndale Road
 Downingtown, PA 19335

CHECK POLICY: \$25.00 service fee for returned checks.

United Sports Membership Information

Yes. I'd like an Annual Membership. Please Check One:

- Individual Membership Fee: \$40.00
- Family Membership Fee: \$80.00

Member benefits include:

- Discounts on future leagues and other USTC programs
- Benefits through USTC sponsors and partners.
- Visit our website for complete list of benefits or member registration form.

NO REFUND POLICY: All payments made to USTC are non-refundable unless a league is cancelled by USTC due to insufficient participation. A \$25.00 fee will be charged for a returned check. Membership is valid for one year from date of payment