

# 2019 Spring Jr. Pirate Youth Hockey League



**Tuesday, March 26<sup>th</sup> – Saturday, May 18<sup>th</sup>\***

**\*No sessions April 20-25**

**\$175 per player – Registration deadline is March 22<sup>nd</sup> (late entries may be accepted if space permits with a \$50 late entry fee)**

**7 week program / 14 total ice sessions / Divisions split by age and player level**

**Tuesday evening or Thursday evening Skills**

**Saturday morning or Sunday afternoon Scrimmages**

*Each players will receive one weekly Skills Session and one weekly Structured Scrimmage or 3-on-3 session.*

*Players will be assigned a weekly schedule based on enrollment. Schedule may vary from week to week.*

*Separate USA Hockey registration is required.*

**Contacts:** (252) 353-8888 or [skatepairs@aol.com](mailto:skatepairs@aol.com)

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Player Name: \_\_\_\_\_ Age \_\_\_\_\_ DOB: \_\_\_\_\_

Parents Name: \_\_\_\_\_ USA Hockey # \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Last Team/Level Played For: \_\_\_\_\_ Check here is parent is interested in volunteering, if needed \_\_\_\_\_

If you are unavailable on a certain day due to another sport/activity – please list the day you are not available and activity below:

\_\_\_\_\_

I, the undersigned parent/guardian of the above named registrant, hereby give my approval for his/her participation in any Carolina Ice Zone Youth Hockey activities. I assume all the risks, hazards, and incidental expenses for such participation, including transportation to and from activities. I hereby waive, release, absolve, indemnify, and agree to hold harmless Carolina Ice Zone, directors, league officers, supervisors, officials, and coaches to any injury to my son/daughter whether the result of negligence or any other cause. In the event that one parent executes this agreement, the signer acknowledges that he/she is also acting as agent of the other parent with authority to enroll the child in this program and to execute this agreement on his/her behalf. All leagues are subject to adjustment based on enrollment and skill.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_