

2021 Spring Jr. Pirate Youth Hockey Program



Tuesdays and/or Thursdays – 1 hour sessions, time TBA (will be between 5:30-8:30pm based on enrollment)

Tuesday Skill Development Sessions – April 13, 20, 27, May 4, 11, 18, 25

Thursday Coached Scrimmages (3x3, 4x4, 5x5) / Positioning / Hockey IQ - April 15, 22, 29, May 6, 13, 20, 27

\$250 per player for 2 days/week for 7 weeks OR

\$140 per player for 1 day/week for 7 weeks OR

\$25/session walk-on (if space allows)

Players will be split by age/level and Players will be assigned a time based on enrollment.

Separate USA Hockey registration is required for players who did not participate in the regular season.

Contacts: (252) 353-8888 or skatepairs@aol.com

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 _____

I am interested in a Spring Tournament Team for an additional fee if there are enough players in my age group YES NO

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.

Furthermore, the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and spreads from person-to-person contact. The Carolina IceZone has put in place preventative measures to reduce the spread of communicable diseases; however, we cannot guarantee that you or your child(ren) will not become infected while attending our facilities. While we've implemented reasonable preventive measures, we depend on each and every visitor and their families to follow the guidelines from the Center of Disease Control, and all applicable federal, state, and local health department guidelines, rules, laws, and regulations before and while visiting our premises. We are all in this together and rely on each other to adhere to the above-mentioned guidance and legal restrictions. The undersigned fully understands and acknowledges both the known and potential dangers of utilizing our facilities, services, and programs and acknowledge that use thereof by the undersigned and/or such participating children may, despite our reasonable best efforts to mitigate such dangers, result in exposure to communicable diseases, which could result in quarantine requirements, serious illness, disability, and/or death.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____