2025 Spring Jr. Pirate Youth/Teen Hockey





Tuesdays evenings (Skills) and/or Thursday evenings (Game Play) - *approximate times, subject to change

*Players will be divided by age/level and sessions will start no earlier than 5:15pm and end no later than 8:15pm

March 25, 27, April 1, 3, 8, 10, 15, 17, 22, 24, 29

May 1, 6, 8, 13, 15, 20, 22, 27, 29

\$475/player for 2 days/week for 10 weeks OR

\$275/player for Tuesday Skill Development Only / \$325/player for Thursday Game Play Only

*Due to coaching practice plans and a progressive program, Walk-Ons and Make-Up sessions are not allowed.

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 2023-24 season

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
all the risks, hazards, and incidental expenses for such hold harmless Carolina Ice Zone, directors, league offic cause. In the event that one parent executes this agree in this program and to execute this agreement on his/COVID-19, has been declared a worldwide pandemic b Carolina IceZone has put in place preventative measure become infected while attending our facilities. While we guidelines from the Center of Disease Control, and all a our premises. We are all in this together and rely on eacknowledges both the known and potential dangers.	registrant, hereby give my approval for his/her participation in any Carolina Ice Zone Youth Hockey activities. I assume participation, including transportation to and from activities. I hereby waive, release, absolve, indemnify, and agree to eas, supervisors, officials, and coaches to any injury to my son/daughter whether the result of negligence or any other ment, the signer acknowledges that he/she is also acting as agent of the other parent with authority to enroll the child her behalf. All leagues are subject to adjustment based on enrollment and skill. Furthermore, the novel coronavirus, of the World Health Organization. COVID-19 is extremely contagious and spreads from person-to-person contact. The est to reduce the spread of communicable diseases; however, we cannot guarantee that you or your child(ren) will not we implemented reasonable preventive measures, we depend on each and every visitor and their families to follow the applicable federal, state, and local health department guidelines, rules, laws, and regulations before and while visiting each other to adhere to the above-mentioned guidance and legal restrictions. The undersigned fully understands and of utilizing our facilities, services, and programs and acknowledge that use thereof by the undersigned and/or such est efforts to mitigate such dangers, result in exposure to communicable diseases, which could result in quarantine requirements, serious illness, disability, and/or death.
Parent/Guardian Signature:	Date:

Payment Date _____

Payment Date _____