



123 Glenwood Avenue Bridgeport, CT  
203-576-8118  
[www.Wonderlandofice.com](http://www.Wonderlandofice.com)

# Spring 2025 House Hockey League

**BOYS & GIRLS OF ALL AGES & SKILL LEVELS ARE  
ENCOURAGED TO PARTICIPATE!**

**League Directors:** Liam and Michael Ferguson  
*Assisted by Gavin Keller*

**MITES, SQUIRTS  
PEE WEES and BANTAMS**

NINE GAME SEASON APRIL 12<sup>th</sup> – JUNE 14<sup>th</sup>  
ALL GAMES SATURDAYS:  
Mites @ 3pm and Squirts, Pee Wees & Bantams @ 4:15pm

**NINE GAMES  
ONE PRACTICE  
\*LEAGUE FEE INCLUDES GAME JERSEY\***

**\$299 PER PLAYER**  
\$299 NON-REFUNDABLE DEPOSIT IS REQUIRED  
\$50 LATE FEE, APPLICATIONS RECEIVED AFTER THE DRAFT

**ALL PLAYERS WILL BE PLACED ON TEAMS**

**FOR MORE INFORMATION CALL (203)338-0202 or (203)799-7200**

**ALL PLAYERS ARE EXPECTED  
TO PLAY AT THEIR  
2025 - 2026 SEASON LEVEL**

*Spring Hockey Directors:* **Liam Ferguson &  
Michael Ferguson**  
*Assisted by* Gavin Keller

***All applications must be received prior to the start of the  
appropriate draft to avoid the late fee.***

***MEET NEW FRIENDS!  
LEARN TO PLAY!  
HAVE FUN!***

**FOR MORE INFORMATION CALL:  
(203)338-0202 or (203)799-7200**

# Wonderland of Ice HOUSE SPRING HOCKEY '25

PLAYER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

PARENT'S NAMES \_\_\_\_\_

PHONE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

EMERGENCY  
NAME & PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

2023-2024 SEASON LEVEL \_\_\_\_\_

CIRCLE SPRING LEAGUE LEVEL DESIRED:

<u>MITE</u>	<u>SQUIRT</u>	<u>PEE WEE</u>	<u>BANTAM</u>
-------------	---------------	----------------	---------------

<u>TOTAL DEPOSIT AMOUNT</u>	<u>\$299</u>
-----------------------------	--------------

<u>After April 12, 2025</u>	<u>\$349</u>
-----------------------------	--------------

PLEASE MAKE CHECK PAYABLE AND MAIL TO:

WONDERLAND OF ICE  
123 GLENWOOD AVENUE  
BRIDGEPORT, CT 06610

(203) 338-0202 or (203) 799-7200

RELEASE MUST BE SIGNED, OVER PLEASE →

**WONDERLAND HOCKEY SCHOOL  
PARTICIPANT WAIVER  
-- READ BEFORE SIGNING --**

In consideration of being allowed to participate in any way in the **Learn to Play Hockey** program, related events and activities of **the Wonderland Hockey School**, I \_\_\_\_\_, the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown of my participation in the Wonderland Skating School, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation in the Wonderland Skating School. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE WONDERLAND OF ICE ASSOCIATES, INC, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I give permission to use photographs and images of myself and/or my child in advertising and promotional materials, including, but not limited to standard social media outlets.
6. I understand that I am also signing a binding contract for the purchase of subscription ice time. No Make-Up classes will be granted unless sessions are cancelled by the Wonderland of Ice. Classes must also be taken on the same day and time each week.

☐ By Checking this box I acknowledge and agree to all of the terms and conditions as specified above and also on the accompanying informational flyer.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

x \_\_\_\_\_ Date Signed: \_\_\_\_\_ Age: \_\_\_\_\_  
PARTICIPANT'S SIGNATURE

**FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE**  
(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

x \_\_\_\_\_ Date Signed: \_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

EMERGENCY PHONES # (s) \_\_\_\_\_