

SUGAR LAND ICE & SPORTS CENTER IN-HOUSE LEAGUE AGREEMENT

PLAYER'S NAME:		USA HOCKEY NU	JMBER:		
ADDRESS:		BIRTH DATE:	BIRTH DATE: ZIP CODE: E-MAIL ADDRESS:		
		ZIP CODE:			
		E-MAIL ADDRES			
PLEAS	E SELECT THE SKATER'S IN-HOUSE LEVEL:				
8U:	\$1200 on or before 8/31; \$2	1250 after 8/31			
	\$1300 on or before 8/31; \$:				
	\$1300 on or before 8/31; \$:				
F1111 F	AYMENT DUE AT THE TIME OF REGISTRAT	FION			
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	TERM	1S AND CONDITIONS			
1.	1. Sugar Land Ice Hockey Department reserves the right to change the day and/ or time of				
	practice/games/lessons. USA Hockey Me		, ,		
2.	· · · · · · · · · · · · · · · · · · ·	•	injured and	therefore cannot skate.	
	Players who are suspended or ejected for		=		
	a refund, exchange, or pro rate of any k	<u> </u>			
3.	The parent or guardian agrees to abide t		ayments and	d agrees to make	
	payments upon scheduled due dates, without reminder from the Sugar Land Ice Hockey Department. If				
	parent or guardian fails to remit paymen		_		
	the above player may be suspended from the league.				
4.	Parent and skater assume all risk and dar	•	ting in gener	al, and the game of	
	hockey in particular. These risks and dangers include, but are not limited to, the danger of being				
	injured by pucks, hockey sticks, and other players. The parent or guardian also agrees that Sugar land				
	Ice & Sports Center is not responsible for loss of or damage to any personal property.				
5	Full equipment required. NO EXCEPTION		•	• •	
		if a minimum of fifteen players per team is not achieved. Each team will			
0.	have an average of fifteen (15) players, t				
7	All Participants in any Sugar Land Ice & S		_		
,.	photographed for instructional and/or pi	•	51 CC 10 DC VI	acotapea ana, oi	
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I	have read and understand the above ter	ms and conditions, and l	agree to abi	de by each of them.	
Parer	nt/Adult Participant Signature:		Date:	Cashier:	