CHOICE INLINE ARENA
150 HOLLYDELL DRIVE
WASHINGTON TOWNSHIP, NEW JERSEY 08080
PHONE: 856-582-1600 FAX: 856-582-1584

YOUTH PLAYER REGISTRATION

X

LAST NAME | FIRST NAME | MIDDLE | DOB

PARENTS NAME (IF PARTICIPANT IS UNDER 18 YEARS OF AGE)

STREET ADDRESS | APT NO.

CITY | STATE | ZIP CODE

( ) HOME PHONE NO. | ( ) CELL PHONE NO.

EMAIL ADDRESS (REQUIRED)

COMPETITION LEVEL: | TEAM NAME: | JERSEY #

☐ MINI-MITE (LTP) ☐ ATOM (LTP) ☐ ATOM (HOUSE) ☐ MITE

☐ SQUIRT ☐ PEE-WEE ☐ BANTAM ☐ Attack Pak

* ALL GAMES WILL BE PLAYED USING USA HOCKEY IN-LINE RULES WITH A 10-GOAL MERCY RULE.
* GAMES WILL CONSIST OF A 5 MINUTE WARM-UP, TWO 20-MINUTE HALVES. THERE WILL BE A 2-MINUTE BREAK AT HALF, AND 5 MINUTE SUDDEN-DEATH OVERTIME. (IF NEC.)
* PLAY WILL CONSIST OF 4 ON 4, PLUS GOALIE, NO OFFSIDES AND NO ICING.
* BODY CHECKING WILL NOT BE ALLOWED AS PER USA HOCKEY IN-LINE.
* FIGHTING AT ANY TIME WILL RESULT IN LEAGUE DISQUALIFICATION.
* EACH PLAYER MUST BE DRESSED AND READY TO PLAY 15 MINUTES PRIOR TO THE START OF EACH GAME.
* GAME CLOCK WILL STOP DURING THE LAST 2 MINUTES OF A 2 GOAL GAME.
* TEAMS WILL BE AWARDED 2 POINTS FOR A WIN, 1 POINT FOR A TIE, AND 0 POINTS FOR A LOSS.
* ALL PLAYERS MUST HAVE A VOLUNTARY RELEASE AND ASSUMPTION OF RISK AGREEMENT SIGNED PRIOR TO LEAGUE PLAY.
* PAYMENTS MAY BE MADE IN EITHER CASH, CHECK, MASTER CARD OR VISA (PLEASE MAKE CHECKS PAYABLE TO CHOICE INLINE, LLC)

OFFICE USE ONLY:

INSURANCE FORM ON FILE _____ PAYMENT TYPE

WAIVER ON FILE CASH _____CHECK NO._____M/C_____VISA_____