

SUMMER 2011 - REGISTRATION FORM

Player Name: _____ Date of Birth: _____ Age: _____

Last Team Played For: _____ Circle Jersey Size: YS YM YL YXL AS AM

Please check the clinic you would like to attend:

_____ Troy Sports Center – Monday 7:00 pm to 8:30 pm
8 week session beginning June 6 thru July 25
* please note: the July 4 class has been moved to Wednesday, July 8

_____ St. Clair Shores Civic Arena – Thursday 6:30 pm to 8:00 pm
8 week session beginning June 9 thru July 28

☐ _____ Please check this box **ONLY IF YOU AGREE** to be placed in the other clinic if your first choice is full.



COST: \$200.00 if registered before May 1, 2011 - \$220.00 if registered after May 1, 2011
PLEASE MAKE CHECK PAYABLE TO: FUTURE CHAMPION HOCKEY

Parent(s) Names: _____

Email address(es): _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Parent Cell Phone: _____

WAIVER AND RELEASE OF LIABILITY

I, the undersigned, do hereby voluntarily submit my application to enroll my child in a Future Champion Hockey clinic. I agree to follow all Future Champion Hockey and rink rules. There is no guarantee for my child's safety. I understand that in order to participate in these clinics my child must wear full hockey protective gear. I understand that there are risks involved with ice hockey and that injuries are common and can be serious, even if my child skates in control and wears protective gear. I freely assume these risks and release Future Champion Hockey, employees, and coaches and any ice rink that the clinic may be held from any liability or claim. My child skates at his/her own risk. I fully understand that Future Champion Hockey may change the instructional time, or cancel a class due to insufficient enrollment. I fully understand that Future Champion Hockey is not required to refund to me any portion of my registration or program fee unless the program paid for is cancelled in which case the unused portion of the program will be refunded.

I have read and understand the foregoing release.

Signature of Player's Parent/Guardian

Date

Future Champion Hockey - 16065 Touraine Drive, Clinton Twp, MI 48038 - Phone- 586-612-0115
Email: futurechampionhockey@gmail.com