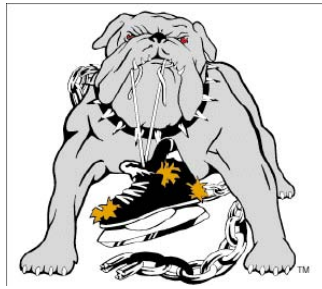


Date: _____



ICE DOGS YOUTH HOCKEY EVALUATION & REGISTRATION FORM

Note: By completing this registration form, you are agreeing to skate for the Ice Dog Hockey Club for the 2010 - 2011 hockey season. In accordance with the DVHL rules and regulations, you will not be permitted to participate with any other DVHL ice hockey club unless requesting and being granted a written release by Ice Dog Hockey. Ice hockey, like any sport, has inherent dangers and risks of serious injury. This document is a release and holds harmless the personnel of Ice Dogs Youth Hockey for any physical injury and all liability, loss or damage.

NAME: _____ **BIRTH DATE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE NUMBER: (_____) _____

POSITION: Defense Offense Goalie **USA HOCKEY REGISTERED 09/10?** Yes No

School _____

School District _____

Please List Previous Hockey Experience – new players only): (include last 2 years teams / levels)

PARENTS NAMES: _____ **EMAIL:** _____

(Parents Signature) _____ Player Signature _____

Ice Dogs Use Only -JERSEY# _____

DATE PAID _____ AMOUNT _____ CHECK# _____ CASH _____

TEAM TO BE PLACED ON _____ BIRTH CERTIFICATE _____