

CHOICE MITE REGISTRATION FORM

Players Name: _____ Birthdate: _____

Address: _____

City: _____

State: _____ Zip: _____ Work Phone (Dad): _____

Home Phone: _____ Work Phone (Mom): _____

Cell (Dad): _____ Cell (Mom): _____

Association: _____

Fathers Name _____ E-mail: _____

Mothers Name _____ E-mail: _____

Height: _____ Weight: _____ Shoot: Right _____ Left _____

Position: Forward _____ Defense _____ Goaltender _____

Silver / Gold

Skaters: _____ Deposit \$400.00 _____ \$1295.00 Paid in Full

Goalies: _____ Deposit \$400.00 _____ \$575.00 Paid in Full

Bronze

Skaters: _____ Deposit \$400.00 _____ \$995.00 Paid in Full

Goalies: _____ Deposit \$400.00 _____ \$400.00 Paid in Full

Rookies

Skaters: _____ Deposit \$400.00 _____ \$895.00 Paid in Full

Visa/MasterCard payment:

Card # _____ - _____ - _____ - _____ Expiration _____ / _____

3 Digit Security Code _____ (back of card on signature line)

Make check payable to/mail to:

Minnesota Made Hockey • 7300 Bush Lake Rd. • Edina, MN 55439 • (952) 746-9033

A 2.5% convenience fee will be automatically added to all credit card payments.

Waiver and Release of Liability: Participant and guardian hereby affirm that by enrolling in any of the Minnesota Made Hockey programs, participant and guardian are required to provide all protective equipment to be used by participant in the program and participant and guardian are responsible for the safety and good operating condition of said equipment. Participant and guardian understand and agree that neither Minnesota Made Hockey nor members of the program- owners, operators, sponsor's agents or instructors of Minnesota Made Hockey may be held liable in any way for any occurrence in the connection with the programs which may result in injury, death, or other damages to participant or participant's family, heirs or assigns. Participant and participant's guardian have agreed to these release terms of their own free will. Participant and guardian have read and understand the contents of this assumption and release. Participant and guardian assume responsibility for participant's physical fitness and capability to perform under normal conditions of Minnesota Made Hockey. Furthermore, I understand that Minnesota Made Hockey reserves the right to use any pictures or videos taken during any programs for advertising and promotional purposes.

Signature _____ Date signed _____

Parent/Guardian signature required with all registrations

www.minnesotamadehockey.com

Minnesota Made Hockey
7300 Bush Lake Rd.
Edina, MN 55439



**CHOICE
MITE
WINTER HOCKEY
LEAGUE**

A REAL **CHOICE** FOR
WINTER HOCKEY

COMING
2011 / 2012
WINTER SEASON

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