2011-12 CHICAGO FURY TRYOUTS

APPLICATION

PLEASE PRINT

Send completed application to:
Arctic Ice Arena, 10700 W. 160th Street, Orland Park, IL 60467
Tel 708-403-4231 or 708-403-2640 Fax 708-403-4248

Circle Level:	Girls U12	Girls U14	Girls U16	Girls U19
	01	00	99	98	97

NAME _____

PARENT/GUARDIAN _____

STREET _____

CITY _____

STATE _____ ZIP _____

PHONE -(HOME) _____ (CELL) _____

EMAIL #1 _____

EMAIL #2 _____

BIRTH DATE MM/DD/YY HT _____ WT _____

POSITION: Goal _____ Forward _____ Defense _____

PREVIOUS TEAM _____

2011-2012 USA HOCKEY # _____

TRYOUT FEE:

TIER I AAA ☐ $75 returning FURY ☐ $100 Non-Fury

GIRLS AAA ☐ $75 returning FURY ☐ $100 Non-Fury

METHOD OF PAYMENT

Please indicate the method of payment :

☐ CASH ☐ CHECK ☐ CREDIT CARD

Amount Enclosed $ _____

NOTE: Do not forward cash payments with mailed applications.

Make checks payable to: ***Chicago Fury***

Credit Card Users Only:

☐ Visa ☐ MasterCard ☐ Discover ☐ AmEx Exp. ____/____

Card # | | | | | | | | | | | | | | | | |

_____ _____

Full Name of Cardholder (Please Print) Signature of Cardholder

WAIVER

Hold Harmless Agreement

I agree to release Arctic Ice Arena and any of its respective affiliates, owners, members, shareholders, subsidiaries, directors, officers, employees, and all agents from claims, actions, causes of actions, damages to or by the undersigned person, their parents/guardians for loss of injury resulting directly from the participation of such person in this program. I further agree to indemnify and save harmless such parties from claims, actions, damages or demands, from such participation in this program, including all costs and expenses incurred in defending any such claims or actions. I have read the release and understand this is a full final release of claims for injury and damages sustained in Arctic Ice Arena and have read over the agreement and understand the responsibilities I have assumed thereunder.

I also agree that my name and image may be used in perpetuity in any photographs, motion picture films, television broadcasts, and/or in any radio broadcasts of Arctic Ice Arena without payment of funds to holder in connection therewith.

_____

Print Player NameSignature

_____

Print Parent/Guardian NameSignature