



**Mahwah Ice Hockey Association  
115 Franklin Turnpike - PMB Suite 263  
Mahwah, New Jersey 07430**



**ICE HOCKEY 2008 SPRING  
REGISTRATION**

Registration based on the appropriate age level

\_\_\_\_\_ Mites – 8 years and under                      Previous Experience: \_\_\_\_\_  
 \_\_\_\_\_ Squirts – 10 years and under                      \_\_\_\_\_  
 \_\_\_\_\_ Pee Wee – 13 years and under                      Are you currently registered with USA Hockey? \_\_\_\_\_  
 \_\_\_\_\_ Bantam – 16 years and under  
 \_\_\_\_\_ High School - 18 years and under                      Jersey number if currently playing for MIHA \_\_\_\_\_

Player's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_

Mother's name and Phone # \_\_\_\_\_

Father's Name and Phone # if different: \_\_\_\_\_

E-mail address where you want team information sent: \_\_\_\_\_

**Costs:**

Mites - \$290  
 Squirts - \$330  
 PeeWees - \$380  
 Bantams - \$380  
 High School - \$380

Hockey socks \$10

Jerseys \$40 - \_\_\_ Child's Med. \_\_\_ Adult Med. \_\_\_ Adult Large \_\_\_ Adult XL \_\_\_ Adult XXL

**TOTAL DUE:** \_\_\_\_\_

**Payment Schedule:** Payment in full is due at time of registration to reserve spot on team - After February 14th rosters will be open to non-Mahwah residents. All checks should be made payable to the MIHA. If you are not registering in person, payment should be sent to the above address. **Payments are non-refundable.**

The following equipment is mandatory: HECC approved helmet with full face mask, attached mouthpiece, elbow and shin guards, gloves, supporter and cup, hockey pants, shoulder pads, hockey skates and stick.

**2008 Spring Season**  
**Mahwah Ice Hockey Association Waiver**

In consideration for being allowed to participate in this ice hockey program or any practices for this program, I (we) agree to the following statements: (i) We, the undersigned, agree that there is no medical risk due to previous injury or illness to the player by participating in hockey. (ii) I acknowledge that both ice and roller hockey involve risks of serious injury. These risks include both death and/or paralysis that might result from the players own actions, the inaction or negligence of others, the rules of play, or the condition of the premises or any equipment used. (iii) We the undersigned assume such risks as the risks of the sport and assume such risks as our responsibility. (iv) The undersigned further holds harmless the coaches, officials, administrators of the Mahwah Ice Hockey Association, and any rink operator, and releases them from any and all liability, damages or losses which might occur due to negligence or any other action.

I also agree to abide by the Mahwah Ice Hockey Association Code of Ethics and understand that if a player or his/her parents or guardians cannot abide by the Code of Ethics, the player will not be allowed to play and there will be no refund.

The undersigned has read the above waiver and release, the undersigned understands that they have given up substantial rights by signing it and sign it voluntarily. The undersigned understands both the financial responsibility and the risks involved. The undersigned agrees that by signing, they are responsible for the entire amount due and there is no refund for any reason. Also the undersigned acknowledges that playing time maybe affected by absence of player from practices.

**CONSENT TO TREAT**  
**PARTICIPANT WAIVER AND RELEASE OF LIABILITY**

I acknowledge and assume all risks of injury associated with participating in the ice facility skating programs. I also agree that North Fork Ice Vault, Sport-o-Rama, Ice House and any and all of their current or former directors, officers, members, employees, attorneys, representatives, insurers, agents, successors, and assigns (individually and collectively the RELEASEES, shall not be liable to me or my child for any injury or damage, however caused, resulting directly or indirectly from my or my child's participation in any and all ice facility programs at any time preceding, during or after such program is in session. I further understand that no medical, dental or accident insurance is provided to any ice facility program participant, including my child and I, by the ice facility. I release, discharge, and promise not to sue the RELEASEES from and with respect to any and all claims, actions, suits, liabilities, or damages whatsoever which against the RELEASEES, my child and I have, or hereafter can, shall, or may have for upon, or by reason of any injury or damage to me or my child. I intend this release to be a general release of any and all claims to the fullest extent permissible by law.

I agree to indemnify and hold harmless the RELEASEES from any injury or damage, however caused sustained by an invitee or guest if either me or my child, resulting directly or indirectly from that invitee or guest's participation in any and all ice facility programs at any time preceding, during or after such program is in session. I grant the ice facility the right to use all photographs or videos taken of me or my child during ice facility programs for advertising and promotional purposes

X\_\_\_\_\_ date /\_/\_

Parent/Guardian Signature (required to play)  
Signature indicates agreement to all the above including waivers of liability & consent to treat