

2011-2012 INLINE HOCKEY APPLICATION CHERRY HILL SKATING CENTER (856) 795-1909

<h2>WHEN?</h2>	SESSION #1—SEPT 14 THRU NOV 2 SESSION #2—NOV 9 THRU JAN 18 SESSION #3—JAN 25 THRU MAR 14 SESSION #4—MAR 21 THRU MAY 9 SKIP THANKSGIVING WEEK AND 2 WEEKS OF HOLIDAY-NEW YEARS.
<h2>DAYS & TIMES?</h2>	<p style="text-align: center;">WEDNESDAY GAMES</p> 5:30-6:30 PM AGES 11 & UNDER 6:30-7:30 PM AGES 14 & UNDER <small>THE PROGRAM FEATURES LEAGUE PLAY BETWEEN TEAMS DRAFTED FROM OUR IN-HOUSE PLAYERS. ROSTERS ARE COMPOSED OF 9 PLAYERS. TEAMS PLAY WITH 4 SKATERS AND A GOALIE. THE SESSION RUNS FOR 8 WEEKS. THE FIRST 2 WEEKS ARE RESERVED FOR DRAFTING AND TEAM PRACTICES. THERE ARE 5 WEEKS OF REGULAR SEASON GAMES WITH THE LAST WEEK RESERVED FOR THE CHAMPIONSHIPS. VOLUNTER COACHES ARE NEEDED. EXPERIENCE IS NOT NECESSARY THE CHERRY HILL STAFF WILL PROVIDE TRAINING.</small>
<h2>COST?</h2>	FEES ARE \$100 PER SESSION (1ST FAMILY MEMBER) FEES ARE \$90 PER SESSION (ADDITIONAL IMMEDIATE FAMILY MEMBER) IF YOU SKATE 3 SESSIONS OF THE 2010-2011 SEASON, THE REMAINING SESSION IS \$90 FOR THE 1ST FAMILY MEMBER. EACH IN-HOUSE HOCKEY PLAYER MUST PAY AN ANNUAL LEAGUE FEE OF \$25.00 (GOOD SEPT. 2011 THRU AUG. 2012)

HOCKEY PLAYERS RECEIVE A TEAM JERSEY WHEN THEY REGISTER THE FIRST TIME FOR THE 2011-2012 SEASON

REQUIRED EQUIPMENT: HELMNET (FULL FACE SHIELD)...INTERNAL MOUTH GUARD...ELBOW & KNEE PADS...SHIN GUARDS...HOCKEY GLOVES...PROTECTIVE CUP (FOR BOYS)...HOCKEY STICK

ALWAYS BRING WITH YOU: YOUR TEAM JERSEY AND A WHITE T-SHIRT, YOUR WATER BOTTLE WITH YOUR NAME ON IT...LABEL YOUR HELMNET AND STICK USING BLACK MARKER ON MASKING TAPE (PRINT FIRST NAME AND LAST NAME IN LARGE LETTERS)

WIN TROPHIES IN TOURNAMENTS

ALL IN-HOUSE PLAYERS ARE INVITED TO COMPETE IN SPECIAL SEASONAL TOURNAMENTS AGAINST IN-HOUSE TEAMS FROM OTHER SKATING CENTERS

WATCH FOR DATES

PARTICIPATION AWARDS / PLACEMENT TROPHIES ARE WON AT THESE TOURNAMENTS



PLAYER AWARD TROPHIES!

PLAY 3 OR MORE SESSIONS OF THE 2011-2012 SEASON AND YOU WILL EARN THE OMNI PLAYER AWARD TROPHY.

WED MAY 9

CHERRY HILL SKATING CENTER 2011-2012 INLINE HOCKEY REGISTRATION FORM

PLEASE PRINT CLEARLY.

NAME: _____ BIRTH DATE: ____ / ____ / ____ AGE: _____

ADDRESS _____ SCHOOL: _____

CITY / STATE: _____ ZIP: _____ EMAIL: _____

HOME PHONE: _____ EMERGENCY PHONE: _____

I, THE PARENT OR GUARDIAN OF THE ABOVE SKATER, DO UNDERSTAND THAT ROLLER HOCKEY IS A SPORT WHICH ACCIDENTS MAY OCCUR AND I DO TAKE FULL RESPONSIBILITY FOR ANY ACCIDENTS WHICH MAY OCCUR DURING THE NORMAL COURSE OF PRACTICE AND GAMES.

PARENT/LEGAL GUARDIAN'S SIGNATURE: _____ DATE: ____ / ____ / ____

PLEASE MAKE CHECKS PAYABLE TO: CHERRY HILL SKATING CENTER

SPACE IS LIMITED...APPLICATIONS WITH PAYMENT RESERVES SPACE...DEADLINE FOR APPLICATIONS IS 5 DAYS BEFORE EACH SESSION (LATE APPLICATIONS ARE ACCEPTED IF SPACE IS AVAILABLE)

PLEASE HAND DELIVER OR MAIL TO
CHERRY HILL SKATING CENTER
664 DEER ROAD
CHERRY HILL, NJ 08034