WNY Roller Hockey League Registration Form:

Have you ever played in the WNY Roller Hockey League before?
 Yes
 No

How did you hear about the WNY Hockey program ?		
INDIVIDUAL PLAYER INFORMATION (Kenan Center 2013)		
First Name	Last Name	Date of Birth
Street Address	City	St Zip
Phone (Home)	Phone (Other)	
	Т	Ţ
Player's age classification is determined as o	f 12/21 of providue year. Proof of Are is r	actived (Vouth Only)
Player's age classification is determined as 0 \Box 3 – 5 vrs old	$\square 6 - 8 \text{ vrs old}$ $\square 9 - 11 \text{ vrs}$	
All WNY House League Players are required to purchase WNY Roller Hockey Membership. Any player that does not acquire the membership WILL NOT be allowed to participate until they have registered. You can fill out a brief form at the rink to register. The cost is \$30 and the Membership is valid until September 1 st 2014.		
What description best describes your in-line s	skating and hockey playing experience? (Youth Only)
□ None □ WNY Hockey Learn to Play	Program	perience Other
May we contact you to inform you of future be	eginner and Intermediate programs?	□ YES □ NO
IMPORTANT!!! All mail-in registrations must be sent to WNY Roller Hockey #109 3843 Union Rd Ste.15 Cheektowaga, NY 14225. Fax registrations should be sent to (716) 634-6714 - once the form is received you will receive an email confirming that your form was received.		
Beginner League \$80 / Goalies \$30		
Adult House League Individual \$115 / Goalies \$6		
30+ League (intended for Adult Beginner Players)) \$80 per player	
Uisa D MasterCard D American E	(press	
	Card #	Exp. Date CVV (3 dig)
Print name as shown on card	Signature	
Print name as shown on card Check / Money Order <u>#</u>	Signature	e to: WNY Roller Hockey
	Signature Make payable	e to: WNY Roller Hockey
	Signature Make payable WAIVER AND RELEASE OF LIABILBILITY AND ASSUMPTION	e to: WNY Roller Hockey
Check / Money Order <u>#</u> In consideration of me being allowed to participate in any way in a 1. I understand the nature of WNY Roller Hockey League Ac	Signature Signature Make payable WAIVER AND RELEASE OF LIABILBILITY AND ASSUMPTION any WNY Roller Hockey League, I agree and acknowledge: tivities and acknowledge my experience and capabilities and i tiss open to the public during the Activity. I further agree and	e to: WNY Roller Hockey
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