

**Battle Creek Over-30 Hockey League
2009-10 Registration Form**



(Please Print)

Last Name: _____ First: _____ Initial: _____

Street Address: _____

City: _____ State _____ Zip: _____

Primary Phone:

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Secondary Phone:

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E-Mail Address: _____

Desired Position (Circle One): C W D G

Returning Player (Please Circle): Yes No

Other Hockey Experience: _____

Jersey Size (Circle One): M L XL XXL XXXL

T-Shirt Size (for post-season awards): M L XL XXL XXXL

I, the undersigned, do hereby agree to abide by the Rules and Regulations of the Battle Creek Over-30 Hockey League (BCOHL). I will not hold the BCOHL liable for any injury or loss of personal property sustained by me as a result of participating in any league activities, and waive, release, and relinquish any and all claims for liability and cause of action. I will play the game of hockey at my own risk with the knowledge that no liability insurance is available through the BCOHL. I acknowledge, understand, and assume all risks related to ice hockey, and understand this activity includes risks and dangers including bodily injury, partial or total disability, paralysis, and death, and I have full knowledge of said risks.

Signature: _____ Date: _____

Dues this year will be \$88 per month plus \$35 registration fee, for a total season cost of \$563.00.* This is a \$18 increase from last season due to expected increases in overall costs. Payment schedule will consist of six monthly payments of \$88, plus the initial registration fee of \$35. Please return this form with the first and last months payment and the registration fee, for a total of \$211.00. Checks will not be cashed until a player is drafted by a team (checks be returned if not placed on a team). In addition, each player must provide proof of registration with USA Hockey.

* \$563.00 season fees is based on an assumed 84 player roster and 6 teams and assumed ice fee the same as last season. Adjustment could occur if registered player numbers are higher or lower or the Arena Management increases our ice fees.

DO NOT SEND CASH. Make check or money order payable to: **BCOHL.**

Please return this form by September 4, 2009 so that teams may be drafted. If not received on time, there is a possibility that you will not be placed on a team.

Return This Form, a Copy of USA Hockey Registration, and Fees To:

**Sean Kelly
5437 S. 38th St.
Climax, MI 49034**

Please copy and forward this to others you know who would like to participate this season.

Sean Kelly President 269-720-1360	Tom Lawrence Vice-President 269-963-0201	Todd Clark Treasurer 269-209-4432	Kirk Parsons Director 269-720-2356	Dewey Waterman Director (269) 207-4056 Primary
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