

3V3 POND HOCKEY LEAGUE



MARCH 26TH - JUNE 1ST

\$195 7-9 SKATERS & 1 GOALIE PER TEAM 9 GAME MINIMUM

SIGN UP AS INDIVIDUAL OR AS A TEAM

EXPANDED LEAGUE

TWO TEAM WORKOUTS WITH HEALTHPLEX TRAINER
REFEREE EACH GAME
SCOREBOARD EACH GAME
LEAGUE JERSEY
SEMI-FINAL GAME AND CHAMPIONSHIP

LEAGUE CHAMPION RECEIVES CHAMPIONS T-SHIRT

6U 8U 10U 14U & 16U 120 MONDAY OR WEDNESDAY OR MONDAY OR FRIDAY WEDNESDAY OR TUESDAY **TUESDAY** THURSDAY **THURSDAY** 5:30 OR 6:30 5:30 OR 6:30 5:30 OR 6:30 7:30 OR 8:30 7:30 OR 8:30 **GOALIES NO GOALIES** GOALIES **GOALIES** GOALIES

- Team applications must be submitted at one time along with each team member's full payment in order to be considered.
- Players must register individually if they are not part of a team application. Individual players will be placed on a team by Hockey Hut staff.
- Teams will not be given a specific time slot, schedule will be sent out two weeks prior to the first game.
- Each team will play 9 games. The #1 seed gets a by to the championship. The #2 and #3 seeds will play each other to determine who plays in the championship. Remaining teams will play an evenly matched team for their 9th and final game.
- All games are TWO 24 minute halves, running time.
- Each penalty results in a penalty shot. All rules for the league will be sent to each individual player & handed out on first night of the league.
- Full equipment is required.
- If you have any further questions, please contact Matt Dempsey @ 518-312-3859, matthewjdempsey02@gmail.com; or the Hockey Hut at 518-371-1469, ronkuhl@myhockeyhut.com.



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APPLICATION PAGE

Team application - \$195 per player - Full payment & application due by March 9th, 2018 Individual application - \$195 per player - Full payment & application due by March 9th, 2018 (Fill in first line)

Mail application and payment to Hockey Hut: P.O Box 4767 Clifton Park, NY 12065

By participating in the Excel Hockey Inc. skating and hockey programs and all related activities, I fully understand that these activities involve risks of serious bodily injury and I fully accept and assume these risks. I herby waive and agree to hold harmless Excel Hockey Inc.; it's owners, coaches, instructors, employees, volunteers and other participants from any and all claims. I have read and fully understand this release and waiver of liability. I also consent to administer first aid and emergency transport to the nearest medical facility.

Player Name	Email	Cell Phone	Jersey Size	Parent Signature
1:			Youth M L YXL Adult S M L	XL
2:			Youth M L YXL Adult S M L	XL
3:			Youth M L YXL Adult S M L	XL
4:			Youth M L YXL Adult S M L	
			Youth M L YXL Adult S M L	XL
6:			Youth M L YXL Adult S M L	
7 :			Youth M L YXL Adult S M L	
			Youth M L YXL Adult S M L	
9:			Youth M L YXL Adult S M L	
10: (G)			Youth M L YXL Adult S M	<u></u>

Division (circle) 8U 10U 12U 14&16U 2017-18 Association and level of play