



# LAPEER COUNTY HOCKEY ASSOCIATION



## REGISTRATION 2018-19

Youth Hockey Registration: \$165

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Father/Guardian Name: \_\_\_\_\_  
 Mother/Guardian Name: \_\_\_\_\_

**PLAYER DIVISION (SELECT ONLY ONE)** Born between the dates below determines division:

Check one:  2001-2003 Midget (16U)  2004-2005 Bantam (14U)  
 2006-2007 Pee Wee (12U)  2008-2009 Squirt (10U)

### PLAYER EXPERIENCE

Goalie - Squirt & Above (If you skate as a goalie in the draft, you must play that position)  
 Played 2017-18 Season @ \_\_\_\_\_  
 Number of years on an organized hockey team  New to the LCHA

### PAYMENT

Parents have the option of paying by check each month at the Polar Palace counter or they can utilize the LCHA Automatic Payment Plan (as described below). Please check which payment method you are choosing:

\_\_\_\_\_ Pay monthly by Check \_\_\_\_\_ Pay by Automatic Payment Plan

### LAPEER COUNTY HOCKEY ASSOCIATION AUTOMATIC PAYMENT FORM

The LCHA offers an automatic payment program and encourages all participants to take advantage. Your payment will be charged to your credit or debit card (Mastercard or Visa) on the 15th of each month, starting Sept. 15th and ending Jan. 15th. Your payment amount depends on which division your son/daughter participates. The monthly payment amounts are listed below. Your participation in this program does not entitle the LCHA to charge or withdraw payments for one time fees such as registration or other fees. Your automatic payment will begin with your next payment due.

### 5-MONTH PLAN - CREDIT/DEBIT: AMOUNTS LISTED ARE (PER MONTH-TOTAL)

Squirt (\$180-\$900)  Pee Wee (\$245-\$1225)  Bantam/Midget (\$275-\$1375)

Credit/Debit Card Type:  VISA  Mastercard

Credit/Debit card number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ CC 3-Digit: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### STATEMENT OF UNDERSTANDING AND LIABILITY/AUTOMATIC PAYMENT AUTHORIZATION

Having read all the presented information herewithin, it is agreed that said player will participate in the 2018-19 season or until released by the Association according to the guidelines set forth by the LCHA and in accordance with MAHA rulings. We understand these guidelines and agree to pay the appropriate registration and monthly ice fees as established by the LCHA. We also understand that all fees apply even if absent due to injury, sickness, and are not refundable. Furthermore, we understand that if said ice bills are not kept current, LCHA will prohibit the player from playing or practicing until all bills are brought current. We acknowledge that the risk of injury from hockey is significant, including the potential for permanent paralysis and death. By participating, we knowingly assume all such risks, both known and unknown even it arising as a player, participant or spectator. We voluntarily and knowingly recognize, accept, and assess the risk and release Lapeer County Hockey Association, Polar Palace Area Complex, its sponsors, event organizers, and officials from liability. Also, if I choose the above automatic payment plan, I hereby authorize the Lapeer County Hockey Association or its agents to initiate debit entries for the amount of the recurring hockey monthly payment plan. The LCHA is authorized to continue debiting this account until

ASSOCIATION OR ITS AGENTS TO INITIATE DEBIT ENTRIES FOR THE AMOUNT OF THE RECURRING HOKEY MONTHLY PAYMENT PLAN. THE LCHA IS AUTHORIZED TO CONTINUE DEBITING THIS ACCOUNT UNTIL SUCH TIME AS I NOTIFY THE LCHA IN WRITING TO CANCEL THIS AUTOMATIC PAYMENT OPTION. I UNDERSTAND A \$25 LATE FEE WILL BE ACCESSED FOR ALL PAYMENTS NOT MADE ON TIME. I HAVE READ AND AGREE TO ALL OF THE INFORMATION HEREWITHIN:

Signature of responsible parent: \_\_\_\_\_ Dated: \_\_\_\_\_

Print Name: \_\_\_\_\_