



**Located at:**

Wildcats Hockey - Riverside, CA  
10540 Magnolia Ave.  
Riverside, CA 92505

Wildcats Hockey - Carlsbad, CA  
2283 Cosmos Court  
Carlsbad, CA 92011

**Send all payments to:** Wildcats Hockey

27758 Santa Margarita PKWY #346  
Mission Viejo, CA 92691

**ENCLOSED IN THIS PACKET YOU WILL FIND THE FOLLOWING:**

- \* REQUIRED PAPERWORK
- \* TEAM INFORMATION SHEET
- \* HOST HOTEL INFORMATION
- 2015-16 Wildcats Tournament Series Hotel Request Form
- \* USA SANCTION INFORMATION
- \* WAIVER & RELEASE FORM
- \* CONTACT INFORMATION

Tournament Director: Darlene Hird

[tournaments@wildcatshockey.com](mailto:tournaments@wildcatshockey.com)

In compliance with all USA Hockey playing rules, each team will be required to meet with the Tournament Director **one hour before the start of their first scheduled game of the tournament** to check your managers notebook. **HOWEVER**, we do need a copy of your **2015 - 2016 USA Hockey Official Certified Team Roster immediately**.

- \* All US teams must have an official USA Hockey Roster for 2015 - 2016.
- \* **All players and bench personnel** must be listed on the USA Hockey official roster or supplemental. **Players may not be added to roster after the start of the Tournament.**
- \* The tournament will be using the 2015 - 2016 USA Hockey age classifications.
- \* All bench personnel must have current USA Hockey membership and have achieved the USA Hockey minimum level of coaching and module education for the division in which he/she is coaching. Canadian teams should submit Hockey Canada equivalent of coaching certification card.
- \* Canadian teams should submit an official Hockey Canada roster or equivalent insurance.
- \* Canadian and **International teams** should submit proof of birth dates for each of their players.

### **TEAM INFORMATION (email to [tournaments@wildcatshockey.com](mailto:tournaments@wildcatshockey.com))**

- \* 2015 - 2016 Verified USA Hockey Team Roster (USA Form 1-T)

Each Team must submit their paperwork (as listed below) in the order presented preferably in a three ring binder at least 1 hour prior to the start of their first game in the tournament or risk disqualification from the tournament.

### **COACH INFORMATION (Head & assistants)**

- \* Only FOUR adults will be allowed on the bench.
- \* USA Hockey Consent to Treat
- \* USA Hockey Waiver of Liability (not required of those who registered online)
- \* USA Code of Conduct

### **PLAYER INFORMATION (each player)**

- \* Supporting paper work for all Alien born players.
- \* USA Hockey Consent to Treat
- \* USA Hockey Waiver of Liability
- \* USA Code of Conduct

	NAME	C.E.P. CARD# & LEVEL	PHONE	EMAIL
HEAD COACH				
ASST. COACH				
ASST. COACH				
ASST. COACH				
MANAGER				

**HEAD COACH:** \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**TEAM MANAGER:** \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**CONTACT PHONE DURING TOURNAMENT:** \_\_\_\_\_

Team Home Colors: \_\_\_\_\_ Team Away Colors: \_\_\_\_\_



#	LAST AND FIRST NAME	POS.

## Terms and Conditions

### Liability Waiver and Photo Consent

Participant(s) and parent(s)/legal guardian(s) understands that he/she attending any events hosted by **Wildcats Hockey LLC, 212 Sports LLC, 212 Sports Center and any of its affiliates and facilities does so at his/her own risk.** Wildcats Hockey LLC, 212 Sports LLC, 212 Sports Center and any of its affiliates and facilities and its owners, employees, agents, or volunteers, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant with his/her family in or about any programs on the premises. Participant(s) and parent(s)/legal guardian(s) assume full responsibility for all injuries and damages which occur in or about any programs on the premises, He/She does hereby fully and forever release discharged hold harmless Wildcats Hockey LLC, 212 Sports LLC, 212 Sports Center and any of its affiliates and facilities, all associated facilities and its owner, employees, agents and volunteers from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility. In addition, he/she agree(s) to follow the rules of conduct and play set by Wildcats Hockey LLC, 212 Sports LLC, 212 Sports Center and any of its affiliates and facilities. Failure to do so may result in suspension from participation. Consent: I the undersigned parent or guardian/participant do hereby grant authority to the staff at Wildcats Hockey LLC, 212 Sports LLC, 212 Sports Center and any of its affiliates and facilities to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby authorize Wildcats Hockey LLC, 212 Sports LLC, 212 Sports Center and any of its affiliates and facilities and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional materials or team films.

### Credit Card Charge Authorization (if applicable)

I hereby authorize Wildcats Hockey LLC, 212 Sports LLC, 212 Sports Center and any of its affiliates and facilities to automatically charge the credit card account on file for their monthly dues or any reoccurring charges when due. I understand that if I want to be removed from auto credit card charge, I must give a written notice via email to [joyce@wildcatshockey.com](mailto:joyce@wildcatshockey.com) 72 hours before the due date or the credit card will be charged.

### Non Sufficient Funds (NSF) and Late Fees

NSF & Late Fees: A fee of \$30 will be imposed for every returned check issued to Wildcats Hockey LLC, 212 Sports LLC, 212 Sports Center and any of its affiliates and facilities along with a \$30 late fee. In the event a check is returned or payment is late, Player will not be eligible to participate in any Wildcats Hockey, 212 Sports, or 212 Sports Center activities until the delinquency is cleared and all return fees are paid. Dues are considered late 5 days past the due date and will have a late fee of \$30 added to your account. All payments will be applied to any outstanding balance first. The company policy is to deposit checks only once for payment.

**I have fully read this document, understand it's meaning and legal impact thereof. I voluntarily, of my own free will and without distress or coercion sign this waiver, release, covenant not to sue and indemnity agreement.**

\_\_\_\_\_  
Parent Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Player (s) Name