



Mail To: SRI Hockey Conditioning-19 Beach Street Narragansett, RI 02882
Phone: 401-744-2562 Web: SRIHockey.com Email: Jon@srihockey.com

Player Information:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian Name: _____

Home Phone: _____ Cell Phone: _____

DOB: _____ Male/Female: _____ Player Age: _____

Main Email: _____

(ALL IMPORTANT CAMP INFORMATION, DETAILS AND UPDATES WILL BE SENT TO THIS ADDRESS!)

Jersey Size (Adult Size S M L XL XXL) _____

T-Shirt Size (Adult Size S M L XL XXL) _____

(DEPENDING ON SUPPLIES AND NUMBER OF CAMP PARTICIPANTS, JERSEY OR T-SHIRT MAY BE OFFERED AT REGISTRATION ON FIRST DAY OF CAMPS/NOT OFFERED FOR PRIVATE LESSONS)

Camp/Lesson

Date of Camp or Lesson: _____

Payment Policy

- 5 Day Camps Pre-Registration- \$150, 5 Day Camps Walk-On 1st Day- \$175, Private lesson- \$50 Per Player Per Hour
- All payments can be made by cash, check or money order made out to Jon Biliouris-Due with Registration form
- Payment mailing address or drop-off location- 19 Beach Street Narragansett, RI 02882
- All Payments Preferably Due At Least 30 Days Before Scheduled Camp Or On Day Of Private Lesson Before Taking the Ice.

Cancellation Policy:

- Cancellations made prior to 7 days before the player’s scheduled camp will receive a full refund.
- Cancellations made after 7 days before the player’s scheduled camp will forfeit funds rendered due to SRI Hockey Conditioning ice payment schedule.
- No Shows on any day of a player’s scheduled camp, whether it is a certain day, number of days or the whole camp will forfeit all funds rendered as payment.
- If a player becomes ill or injured after the 7 days before a camp or at the camp a full refund or percentage refund based on what the player didn’t participate in can be arranged with proof of a doctor’s note.
- SRI Hockey Conditioning cannot provide refunds for cancellations due to unforeseen acts of God, including facility damage/closing complications or weather related rink/facility cancellations. We will issue credit for another camp or lesson at a later date. If SRI Hockey Conditioning cancels for another reason not stated above we will offer you a full refund and we reserve the right to cancel or change camps and lessons, dates or locations.

Hockey Information:

Position: _____

Years of Experience: _____

Current Team and Playing Level: _____

Waiver:

I agree that I shall provide health insurance (including a copy of an insurance coverage card or similar document) to cover any personal injury and property damage sustained by the camper while participating in any activities of or while on the premises of SRI Hockey Conditioning or premises leased or otherwise under the control of SRI Hockey Conditioning. The undersigned assumes all responsibility for any and all risk of damage or injury that may occur to the above named player as a participant in SRI Hockey Conditioning, including practices,

scrimmages, skills sessions, clinics, camps, games, tournaments and other activities related to the program. Additionally, the undersigned hereby releases and discharges the program, Jon Biliouris, Ryan Ginand, Ben Herring, its operators, employees, agents, supervisors, instructors and other players from all claims, demands, rights or causes of action present or future, whether known or anticipated and resulting from or arising out of incident to the undersigned participation in said program. This is also my permission to have my child admitted and attended to, for medical and dental treatment, in case of sickness or injury. I hereby grant SRI Hockey Conditioning the right to use photographs, video images and/or other media of my child for publicity, advertising and/or other commercial purposes. I understand the Event maybe photographed, videotaped or otherwise recorded, I agree to let the above parties use my name, photo likeness and demographic information free of charge in any manner and for any purpose in any media now known or hereafter created. SRI Hockey Conditioning has a zero tolerance policy with respect to uncontrollable behavior, alcohol, tobacco, drugs and other controlled substances and weapons of any kind. Any participant possessing any of these will be immediately dismissed from the program and will forfeit all amount paid. **By signing this release and by being enrolled in this program you assent to the enforcement of this policy and you hereby grant SRI Hockey Conditioning the right to inspect any and all personal belongings at any time on or off premises in relation to the program.** Dates, times and prices are subject to change. I understand that this document is intended to be as broad and inclusive as permitted by the laws of the state in which the Event is taking place and agree that if any portion of this agreement is invalid, the remainder shall continue in full legal force and effect. I further agree that any legal proceedings related to this waiver shall take place in the state of Rhode Island.

I have read and understand the above terms and conditions and hereby agree to participate in these training exercises at my own risk.

Signature of participant

Parent or Guardian

SRI Hockey Conditioning General Liability Release Form

Date: / / 2010

I _____ understand that ice skating, ice hockey and any physical activity involved in conditioning and training is inherently a high risk sport activity and

participation in these activities and sports may result in personal injury to me or others. As a result, I hereby release SRI Hockey Conditioning, its staff and its participating venues from any personal liability, as a result of any injury I may sustain while engaged in these high intensity on and off ice training exercises.

In order to minimize the potential for any personal injury, I also agree not to do anything that would be a violation of the Bradford R. Boss Ice Arena rules and regulations and to wear the proper protective gear including but not limited to a helmet, shoulder pads, elbow pads and shin pads while on ice as well as proper work out attire and footwear during off-ice training.

As of the date of this agreement, I am in good health and represent that I am not aware of any physical or mental health issues that would cause me to sustain any injuries during the participation in these high intensity exercises. If my condition changes, I agree to inform SRI Hockey Conditioning and its staff, as soon as I become aware of any adverse health condition that would prevent me from engaging in this type of activity.

I have read and understand the above terms and conditions and hereby agree to participate in these training exercises at my own risk.

Signature of participant

Parent or Guardian