



Randolph Youth Hockey Club

RANDOLPH TOWNSHIP PARKS AND RECREATION
2017-18 ICE HOCKEY REGISTRATION

The Randolph Youth Hockey Club is excited to announce our OPEN SKATE which will be held on Sunday June 11, 2017 from 4:15 PM to 5:15 PM at Aspen Ice – 16 Aspen Drive Randolph NJ 07869.

ALL Randolph residents who are interested in playing hockey are invited to attend the OPEN SKATE and register for the 2017 – 2018 season.

Please note – Early Registration FEE ends on June 30, 2017:

Mite: *Travel Player \$650, Rec Only \$950 Squirt - Bantam: *Travel Player \$650, Rec Only \$1,200

Jr. Rams Middle School team \$300 (*Pee Wee or Bantam registration will be required for new MS players to RYHC*)

Late registration fee (After June 30th) \$100 Additional (Mite-Bantam)

**Travel Player = Players on NJ Freeze, NJ Colonials, Rockets or other "Travel" Ice Hockey Team*

Registration forms will be posted on the Randolph Youth Hockey web site www.randolphhockey.com

Please download the registration form from the website or use the registration form on page 2 of this document.

Complete the registration form and submit payment in one of three ways:

- a. Drop them off or mail them to 68 Beaver Dam Road Randolph NJ 07869 c/o Brian DesRosiers, Treasurer Randolph Youth Hockey Club
- b. Bring them to our Registration & Open Skate on Sunday June 11, 2017 (4:15 PM to 5:15 PM at Aspen Ice)
- c. Bring them directly to Randolph Township Parks & Recreation Department located at 30 Calais Road Randolph, NJ c/o Randolph Recreation Youth Ice Hockey

Team/League Information for 2017-2018 season:

- Mite, Squirt, Pee Wee, and Bantam teams plan to participate in the Morris County Youth Hockey League (MCYHL)
- The Middle School team will play in the Aspen Ice Middle School League.
- Additional league participation may be available for Squirt age players who wish to play more games in the Twin Oaks league (*additional fees will apply if you decide to participate in the Twin Oaks league*)
- Additional non-league games may be added to increase play and development opportunity at each team level.

Once we have received your registration forms and payment, your player will be placed on a team and will be contacted by the team manager or coach via TeamSnap.

Please contact the Randolph Recreation Department or visit our website www.randolphhockey.com should you have any questions about the program. We look forward to seeing everyone at the rink and in the upcoming season.

**RANDOLPH TOWNSHIP PARKS AND RECREATION
2017-18 ICE HOCKEY REGISTRATION**

Date: _____
Player's Last Name: _____ Player's First Name: _____
Address: _____
Home Phone: _____ Emergency Phone: _____
Parent E-Mail Address: _____ Parent/Guardian Name: _____
Grade: _____ Age: _____ Birth date: _____ Medical Needs/Problems: _____

PARTICIPATING IN A FALL OR WINTER SPORT IN ADDITION TO ICE HOCKEY? YES / NO
IF YES, PLEASE SPECIFY THE SPORT & EXPECTED COMPLETION DATE _____

AGE LEVEL: MITE ('09-'11) SQUIRT ('07-'08) PEE WEE ('05-'06) BANTAM ('03-'04) MIDGET 16U ('01-'02)
JR.RAMS (Middle School)

FEE (Regular Registration, by June 30th):

Mite: Travel Player \$650, Rec Only \$950 Squirt - Bantam: Travel Player \$650, Rec Only \$1,200

Late registration fee (After June 30th) \$100 Additional (Mite-Bantam)

Travel Player = Players on NJ Freeze, NJ Colonials, Rockets or other "Travel" Ice Hockey Team

Jr. RAMS Middle School team: \$300 (Pee Wee or Bantam registration will be required for new players to RYHC)

MIDGET 16U team: \$300

Players must register with USAH on-line and send confirmation number to your head coach.

FEES ARE NON-REFUNDABLE Please make checks payable to Randolph Township.

"Racial Bias" Statement - Parent and Child must read and sign in designated areas:

It is the policy of the Morris County Youth Hockey League to enlist all persons without unlawful discrimination because of racial, ethnic, religious or gender orientation and to promote through its officers, coaches, coordinators and assistants good sportsmanship, team play, spirit, discipline and respect to all of the players of the organization at all sanctioned events on and off the ice. In keeping with this policy, there will be zero tolerance of verbal harassment, slurs or derogatory comments in reference to racial, ethnic, religious or gender orientation at a league sanctioned event by any officer, member, coach, game official, player or non-player of the Morris County Youth Hockey League. Any party found violating this policy will be subject to reprimand, suspension and/or dismissal from the organization, according to the findings of a Board of Inquiry. Upon notification to the League, a Board of Inquiry will be convened to investigate the alleged bias incident and render a decision. The Board will consist of four (4) non-affected town coordinators and one league officer.

We, the undersigned, do hereby understand the above Morris County Youth Hockey League and Randolph Recreation Ice Hockey policy and swear to abide by this and all other rules and policies established by USA Hockey, the Morris County Youth Hockey League, and Randolph Recreation.

X Registrant Signature: _____ **Parent/Guardian Signature:** _____

I give my child/ward _____ permission to participate in the Randolph Ice Hockey Program.

I understand the activity will be supervised and the Township **DOES NOT INSURE** participants with accident insurance and you participate at your **OWN RISK**. It is understood this program is a physical activity and various injuries may occur. I also understand it is my responsibility to make sure the registrant is physically capable of participating in this program and a medical physical by a doctor is recommended.

I verify that the above stated address is the permanent residence of the above named registrant and that all information stated above is, to the best of my knowledge, true and correct. Any intentional falsifying of information will result in automatic expulsion of my child/ward from the program and possible prosecution. I agree to abide by all rules, regulations and policies as set forth by the Department of Parks and Recreation, the Recreation Committee and the Recreation Hockey Committee. I also understand that registration of my child does not guarantee he/she has been accepted into the program. I understand that all players are admitted into the program on a conditional basis, pending review of their skill set by the coaching staff, and pending acceptance of our teams into the league.

X Participant Signature (parent/guardian if participant under 18 years old) _____

CASH: _____ **AMOUNT:** _____ **CHECK #:** _____ **AMOUNT:** _____



USA Hockey

Consent To Treat/Medical History Form



This is to certify that on this date, I _____, as parent or guardian of _____, (athlete participant), or for myself as an adult participant, give my consent to USA Hockey and its medical representative to obtain medical care from any licensed physician, hospital, or clinic for the above mentioned participant, for any injury that could arise from participation in USA Hockey sanctioned events.

If said participant is covered by any insurance company, please complete the following:

Insurance Company: _____

Policy Number: _____

Parent/Guardian/Adult Participant Signature: _____ **Date:** _____

Excess accident insurance up to \$50,000, subject to deductibles, exclusions and certain limitations, is provided to all USA Hockey registered team participants. For further details visit usahockey.com or contact USA Hockey at (719) 576-USAH.

EMERGENCY CONTACT

Name: _____ Phone: _____

Address: _____

Physician's Name: _____ Phone: _____

Hospital of Choice: _____

COMPLETION OF MEDICAL HISTORY INFORMATION BELOW IS OPTIONAL

MEDICAL HISTORY

If the answer to any of the following questions is yes, please describe the problem and its implications for proper first aid treatment on the back of this form.

- | | | |
|---|--|--|
| <input type="checkbox"/> Head Injury
<i>(concussion, skull fracture)</i> | <input type="checkbox"/> Asthma | <input type="checkbox"/> Allergies _____ |
| <input type="checkbox"/> Fainting spells | <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Convulsions/epilepsy | <input type="checkbox"/> Kidney problems | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Neck or back injury | <input type="checkbox"/> Hernia | _____ |
| | <input type="checkbox"/> Heart murmur | _____ |

Have you had (or do you currently have) any of the following?

Have you had a recent tetanus booster? Yes No If yes, when? _____

Are you currently taking any medications? Yes No If yes, please list all medications on back.

Has a doctor placed any restrictions on your activity? Yes No If yes, please explain on back.



**USA HOCKEY
PARTICIPANT
CODE OF CONDUCT**

NAME: _____

To be read and signed by you as a member of Team: **RANDOLPH YOUTH ICE**

HOCKEY Participating in USA Hockey for the 2017 - 2018 season.

1. No swearing or abusive language on the bench, in the rink, or at any team function.
2. No lashing out at any official no matter what the call is. The coaching staff will handle all matters pertaining to officiating.
3. Anyone who receives a penalty will skate directly to the penalty box.
4. Fighting will not be tolerated. Fighting will result in an appearance before a Discipline Committee.
5. There will be no drinking, smoking, chewing of tobacco or use of illegal substance at any team function.
6. I will conduct myself in a befitting manner at all facilities (ice rink, hotel, restaurant, etc) during all team functions.
7. Any player or team official who cannot abide by these rules or violates them will be subject to further disciplinary action.

Signed: _____ Date: _____



USA HOCKEY PARENT'S CODE OF CONDUCT

NAME: _____

To be read and signed by you as a parent of a team member of: **RANDOLPH YOUTH ICE**

HOCKEY Participating in Randolph Recreation Ice Hockey / USA Hockey for the 2017-2018 season.

*Do not force your children to participate in sports, but support their desires to play their chosen sports. Children are involved in organized sports for their enjoyment. **Make it fun.***

1. Encourage your child to play by the rules. Remember, children learn best by example, so applaud the good plays of both teams.
2. Do not embarrass your child by yelling at players, coaches or officials. By showing a positive attitude toward the game and all of its participants, your child will benefit.
3. Emphasize skill development and practices and how they benefit your young athlete. De-emphasize games and competition in the lower age groups.
4. Know and study the rules of the game and support the officials on and off the ice. This approach will help in the development and support of the game. Any criticism of the officials only hurts the game.
5. Applaud a good effort in both victory and defeat, and enforce the positive points of the game. Never yell or physically abuse your child after a game or practice – it is destructive. Work toward removing the physical and verbal abuse in youth sports.
6. Recognize the importance of volunteer coaches. They are important to the development of your child and the sport. Communicate with them and support them.
7. If you enjoy the game, learn all you can about hockey – and volunteer.

Signed: _____ Date: _____