



St. Joseph's Prep Ice Hockey

2009 – 2010 Registration

Welcome to the 2009-2010 Season of the St. Joe's Prep Ice Hockey Club.

The following contains a summary of Club policies and forms required for Registration, Tuition Payments, and ordering of Uniforms and Apparel. Deadline for Registration and first Tuition Payment is June 15, 2009.

Attached to this document you will find:

- Club Registration Forms:
 - Contact Information, Player Bios
 - In addition to the forms provided, you will need to provide a copy of the Player's Birth Certificate (or drivers license) and a copy of your Health Insurance Card
- USA Hockey Consent to Treat
- USA Hockey Medical History
- USA Hockey Waiver
- Tuition Schedule and Payment Coupons
- Uniform Order Form
- Apparel Order Form

USA Hockey Registration

- Please note that USA Hockey has changed their registration year so that membership coverage now runs May 1st through April 30th. USA Hockey 2009-2010 registration is a pre-requisite for St. Joe's Prep Club Registration.
- St. Joe's Prep Ice Hockey Club uses the online registration process. Each parent (players under 18 cannot register themselves) should register their son directly with USA Hockey at www.usahockey.com. USA Hockey charges a registration fee. If your son is, or will be, registered by a club team you need to register only once. If your son will be registered by club team please send a note to ChuckStinson@aol.com indicating which club team will be registering your son and provide your USA Hockey confirmation number.
- A USAH Confirmation receipt must be provided. Confirmation receipts may be mailed in with Registration or emailed to ChuckStinson@aol.com.

Prep Hockey Registration

- The deadline for Registration is June 15, 2009. Players will not be able to participate in the August Camp unless registration is complete. Please note that uniform orders are due by July 1st (see attached Uniform Order form).
- Registration forms (attachments 1 – 4) should be returned to:
Chuck Stinson, 37 Meadows Lane, Haverford, PA 19041 Any questions regarding registration should be directed to Chuck Stinson (ChuckStinson@aol.com; Phone: 610-888-5282)

Prep Hockey Tuition Payment and Refund Policy

- Full Tuition for the 2009-2010 Season is \$1100 due as listed on Attachment 5.
- The deadline for first Tuition Payment is June 15, 2009. Checks should be made payable to “Boy’s Prep Ice Hockey” and mailed, accompanied by the applicable slip below, to: Prep Hockey c/o Matt Melone, 61 Cedar Hill Lane, Media, PA 19063.
- Any questions regarding tuition should be directed to Matt Melone (610-304-4325; mam9@lehigh.edu).
- Families with concerns regarding their ability to meet the payment schedule should contact Matt Melone or any member of the Prep Hockey Board to discuss their situation as failure to make payments as scheduled may impact player eligibility to participate in Club activities.

PREP HOCKEY PHILOSOPHY

- Consistent with SJP ideal of “a healthy mind in a healthy body”
- Strive for excellence in academics and athletics (student /athletes) - Both are crucial for a successful program
- Promote good sportsmanship and enhance the academic, physical, social, and emotional development of our sons
- Maintain an environment which teaches the values of self-discipline, respect, responsibility, fairness, positive competition and a spirit of excellence

PRIORITIES

- SAFETY FIRST- Ice hockey is a fast, physically- demanding sport. We will strive to protect our student/athletes from undue risk by evaluating the physical conditioning, skill level and proper equipment needed by prospective players to compete safely at this level.
- ACADEMICS- Participating in high school sports at SJP is a privilege. A great amount of effort goes into creating the opportunity. Consequently, the privilege of participating comes with the responsibility of maintaining acceptable academic and social behavior. We expect that all players will learn how to manage their time appropriately so that they can succeed in the classroom. Academics come first.

CODE OF CONDUCT

- Respect the game by respecting your coaches, your teammates, your opponents and the officials
- Value the contribution of each member of the team
- Play with pride, work hard at all times and enjoy the experience
- Adhere to and support all team policies as outlined by the Head Coach
- Adhere to the guidelines in the SJP student directives and conduct yourself in a manner consistent with the philosophy of SJP

Attachment 1: Player / Family Contact Information & Publicity Release

Last Name _____

Address: _____

Home Phone Number: _____

Player Name: _____ e-mail: _____

phone: _____ cell? Y / N _____

Parents Information

Mother's Name: _____

e-mail: _____

work phone: _____ cell phone: _____

Father's Name: _____

e-mail: _____

work phone: _____ cell phone: _____

Publicity: Permission is granted to the St. Joe's Prep Ice Hockey Club to use the name and both team and individual photographs of my son in any promotional or informational materials produced by The Club. This permission extends to but is not limited to the Club website.

Parent Signed: _____

Date: _____

Please return to: Chuck Stinson, 37 Meadows Lane, Haverford, PA 19041

Attachment 2: Player Bio

Name _____

Height: _____ Weight: _____

Hometown: _____ School Year (09-10): _____

Shot: Right / Left Position: _____

Club Team (current or prior to Prep Ice Hawks): _____

Number of years of hockey experience: _____

Grade School/Middle School: _____

Favorite TV Program: _____

Favorite Movie: _____

Favorite Musical Group: _____

Hockey Hero: _____ Overall Sports Hero: _____

Best thing you like about The Prep: _____

Favorite School Subject: _____

Hockey Honors/Awards: _____

Favorite highlight while playing for the Prep Ice Hawks: _____

Anything else we should include in your bio: _____

Please return to: Chuck Stinson, 37 Meadows Lane, Haverford, PA 19041



Attachment 3: USA HOCKEY CONSENT TO TREAT & MEDICAL HISTORY

This is to certify that on this date, I _____, as parent or guardian of _____, give my consent to USA Hockey, St. Joe's Prep. Ice Hockey Club, and their medical representatives to obtain medical care from any licensed physician, hospital, or clinic for the above mentioned athlete, for any injury that could arise from participation in USA Hockey sanctioned events. If said athlete is covered by any insurance company, please complete the following:

Name of Insurance Company:

Address:

Policy Number:

Signed:

Date:

(parent/guardian)

Relationship to Athlete:

Home Address:

Phone: (_____) _____ Date: _____

Excess accident insurance up to \$25,000, subject to deductibles, exclusions and certain limitations, is provided to all USA Hockey registered team participants. For further details, call Jay Bernard at 1-800-486-6880.

MEDICAL HISTORY FORM

Name: _____ Date: _____

Address: _____ Birthdate: _____

Daytime Phone: _____ Evening Phone: _____

WHO TO CONTACT IN CASE OF AN EMERGENCY?

Name: _____

Relationship: _____

Daytime Phone: _____ Evening Phone: _____

Physician's Name: _____

Daytime Phone: _____ Evening Phone: _____

USA HOCKEY CONSENT TO TREAT & MEDICAL HISTORY (continued)

Hospital of Choice: _____

PLEASE COMPLETE THE FOLLOWING:

If the answer to any of the following questions is or was yes, please describe the problem and its implications for proper first aid treatment on a separate piece of paper.

Have you had (or do you presently have) any of the following? Circle One

- Head injury (concussion, skull fracture) Yes No
- Fainting spells Yes No
- Convulsions/epilepsy Yes No
- Neck or back injury Yes No
- Asthma Yes No
- High blood pressure Yes No
- Kidney problems Yes No
- Hernia Yes No
- Diabetes Yes No
- Heart murmur Yes No
- Allergies Yes No
Please specify: _____
- Injuries to:
 - Shoulder Yes No
 - Knee Yes No
 - Ankle Yes No
 - Fingers Yes No
 - Arm Yes No
 - Other: _____
- Impaired vision Yes No
- Impaired hearing Yes No
- Other: _____

Have you had a recent tetanus booster? _____ If so, when?

Are you currently taking any medications? _____ What? Why? _____

Has the doctor placed any restrictions on your activity? _____ Explain: _____

Athlete Signed: _____

Date: _____

Parent Signed: _____

Date: _____

Please return to: Chuck Stinson, 37 Meadows Lane, Haverford, PA 19041

Attachment 4 :



Prep Hockey Waiver of Liability, Release, Assumption of Risk & Indemnity Agreement

It is the purpose of this agreement to exempt, waive and relieve releasees from liability for personal injury, property damage and wrongful death, including if caused by negligence, including the negligence, if any, of releasees. "Releasees" include USA Hockey, Inc., Saint Joseph's Preparatory School ("Prep") and Boys Prep Ice Hockey Club ("Prep Hockey") and each of their respective affiliate associations, local associations, member teams, event hosts, other participants, coaches, officials, sponsors, advertisers, and each of them, and their respective officers, directors, agents and employees. For and in consideration of the undersigned participant's registration with USA Hockey, Inc., its affiliates, local associations and member teams (all referred to together as "USAH") and with the Prep and Prep Hockey, and being allowed to participate in USAH, Prep and Prep Hockey events and activities, participant (and participant's parent(s)/legal guardian(s), if applicable) waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury, property damage or wrongful death occurring to participant, arising out of participation in USAH, Prep and/or Prep Hockey events or activities, the sport of ice hockey, and/or activities incidental thereto, whenever or however they occur and for such periods as such activities may continue, and by this agreement any such claims, rights, and causes of action that participant (and participant's parent(s)/legal guardian(s), if applicable) have and/or may have are hereby waived, released and relinquished, and participant (and participant's parent(s)/legal guardian(s), if applicable) do so on behalf of my/our and participant's heirs, executors, administrators and assigns.

Participant (and participant's parent(s)/legal guardian(s), if applicable) acknowledge, understand and assume all risks relating to ice hockey and any member team activities, and understand that ice hockey and member team activities involve risks to participant's person including bodily injury, partial or total disability, paralysis and death, and damages which may arise therefrom and that I/we have full knowledge of such risks. These risks and dangers may be caused by the negligence of the participant or the negligence of others, including the "releasees" identified above. These risks and dangers include, but are not limited to, those arising from participating with bigger, faster and stronger participants, and these risks and dangers will increase if participant participates in ice hockey and member team activities in an age group above that which participant would normally participate in. I/We further acknowledge that there may be risks and dangers not known to us or not reasonably foreseeable at this time. Participant (and participant's parent(s)/legal guardian(s), if applicable) acknowledge, understand and agree that all of the risks and dangers described throughout this agreement, including those caused by the negligence of participant and/or others, are included within the waiver, release and relinquishment described in this agreement. I/We agree to abide by and be bound under the rules of USA Hockey, Inc., including the By-Laws of such corporation, and the arbitration clause provisions, as currently published, as well as the rules of the Prep and Prep Hockey. Copies are available to USA Hockey members upon written request.

Participant (and participant's parent(s)/legal guardian(s), if applicable) acknowledge, understand and assume the risks, if any, arising from the conditions and use of ice hockey rinks and related premises and acknowledge and understand that included within the scope of this waiver and release is any cause of action (including any cause of action based on negligence) arising from the performance of, or failure to perform, maintenance, inspection, supervision or control of such rinks and premises and for the failure to warn of dangerous conditions existing at such rinks and premises, for negligent selection of certain releasees, or negligent supervision or instruction by releasees.

Participant (and participant's parent(s) /legal guardian(s), if applicable) agree that if any claim for participant's personal injury, property damage or wrongful death is commenced against releasees, he/she/they shall defend, indemnify and save harmless releasees from any and all claims or causes of action by whomever or wherever made or presented for participant's personal injuries, property damage or wrongful death.

If the law in any controlling jurisdiction renders any part of this agreement unenforceable, the remainder of this agreement shall nevertheless remain enforceable to the full extent, if any, allowed by controlling law. This agreement affects your legal rights, and you may wish to consult an attorney concerning this agreement.

Participant (and participant's parent(s)/legal guardian(s), if applicable) acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers of ice hockey and understand these waivers and releases are necessary to allow amateur ice hockey to exist in its present form. Significant exclusions may apply to USA Hockey's insurance policies, which could affect any coverage. For example, there is no liability coverage for claims of one player against another player. Read your brochure carefully and, if you have any questions, contact USA Hockey or a District Risk Manager.

_____	Age _____	Date Signed _____
PARTICIPANT SIGNATURE		

PARTICIPANT NAME (PRINT)		
_____		Date Signed _____
PARENT OR GUARDIAN SIGNATURE		
(if Participant is 17 years of age or younger)		

Please return to: Chuck Stinson, 37 Meadows Lane, Haverford, PA 19041

Prep Ice Hockey
May 2009



**ST. JOSEPH'S PREP. ICE HOCKEY
TUITION PAYMENT FORM**

Tuition for the 2009-2010 season is \$ 1,100.00, payable in three installments. The cost of the summer camp is \$ 75.00 and is to be included with the first tuition installment. Tuition is payable in three installments as follows:

- June 15, 2009: \$ 475.00 (includes \$ 75.00 for summer camp)
- September 15, 2009: \$ 400.00
- November 15, 2009: \$ 300.00

Note: If the player will not be attending the summer camp please deduct \$ 75.00 from the amount due on June 15, 2009.

Checks should be made payable to “**Boy’s Prep Ice Hockey**” and mailed, accompanied by the applicable slip below, to:

Prep Hockey
c/o Matt Melone
61 Cedar Hill Lane
Media, PA 19063

Any questions regarding tuition should be directed to Matt Melone (610-304-4325; mam9@lehigh.edu).

Tuition Installment # 1: \$ 475.00

Due: June 15, 2009

Name _____

Tuition Installment # 2: \$ 400.00

Due: September 15, 2009

Name _____

Tuition Installment # 3: \$ 300.00

Due: November 15, 2009

Name _____



**ST. JOSEPH'S PREP. ICE HOCKEY
UNIFORM ORDER FORM**

Player's Name _____
Uniform Number: First choice _____ ; **Second Choice** _____ ; **Third Choice** _____

Item	Price	Size*	Quantity	Total
Home Jersey- White	\$ 80.00			
Away Jersey -Black	\$ 108.00			
Practice Jersey	\$ 25.00			
Shell	\$ 48.00			
Home Socks-White	\$ 15.00			
Away Socks-Black	\$ 15.00			
Long-sleeved Under Armour (Crimson)	\$ 25.00	N/A		
Hockey Bag**	\$ 95.00	N/A		
"Prep Hockey" Jacket***	\$ 95.00			
Helmet Stickers	\$ 15.00	N/A		

TOTAL DUE \$ _____

***Jersey sizes are adult small, medium, large, XLarge, and XXXLarge. Socks and shells come in youth and adult sizes.**

**** Hockey bags are personalized with player's first initial, last name, and uniform number**

***** Jackets are personalized with player's name on the front and number on sleeve**

UNIFORM ORDERS MUST BE PLACED BY JULY 1, 2009 TO ENSURE THAT THEY ARE AVAILABLE FOR THE START OF THE SEASON.

Checks should be made payable to **"Boy's Prep Ice Hockey"** and mailed, accompanied by this form, to:

Prep Hockey
c/o Matt Melone
61 Cedar Hill Lane
Media, PA 19063



**ST. JOSEPH'S PREP. ICE HOCKEY
APPAREL ORDER FORM**

Player's Name _____

Item	Price	Size	Quantity	Total
Gray Knit Hat	\$15.00	N/A		
Black Knit Hat	\$15.00	N/A		
Black Baseball Cap	\$20.00	S/M/L/XL		
Gray Baseball Cap	\$20.00	S/M/L/XL		
White Baseball Cap	\$20.00	S/M/L/XL		
Black V-neck Pullover Windshirt	\$50.00	S/M/L/XL/XXL		
"Prep Hockey" Sweatpants	\$30.00	S/M/L/XL/XXL		
Heavy Weight Hooded Sweatshirt	\$45.00	S/M/L/XL/XXL		
Mock Turtle w/logo	\$25.00	S/M/L/XL/XXL		
White Short-sleeved T-shirt	\$15.00	S/M/L/XL/XXL		
Gray Short-sleeved T-shirt	\$15.00	S/M/L/XL/XXL		
Crimson Short-sleeved T-shirt	\$15.00	S/M/L/XL/XXL		
Black long-sleeved T-shirt	\$22.00	S/M/L/XL/XXL		
White golf shirt	\$25.00	S/M/L/XL/XXL		
Black golf shirt	\$25.00	S/M/L/XL/XXL		

TOTAL \$ _____

Checks should be made payable to **"Boy's Prep Ice Hockey"** and mailed, accompanied by this form, to:

Prep Hockey
c/o Matt Melone
61 Cedar Hill Lane
Media, PA 19063