

SALT LAKE COUNTY PARKS AND RECREATION

FRIDAY



World Division Drop-In Hockey League

Full equipment is required
Full face shield is highly recommended

16 Game Schedule

Games are played on Fridays at 9:45pm to 11:15pm
Acord Ice Center
A Schedule will be provided the first day.

Individual registration will be taken at the Acord Ice Center.

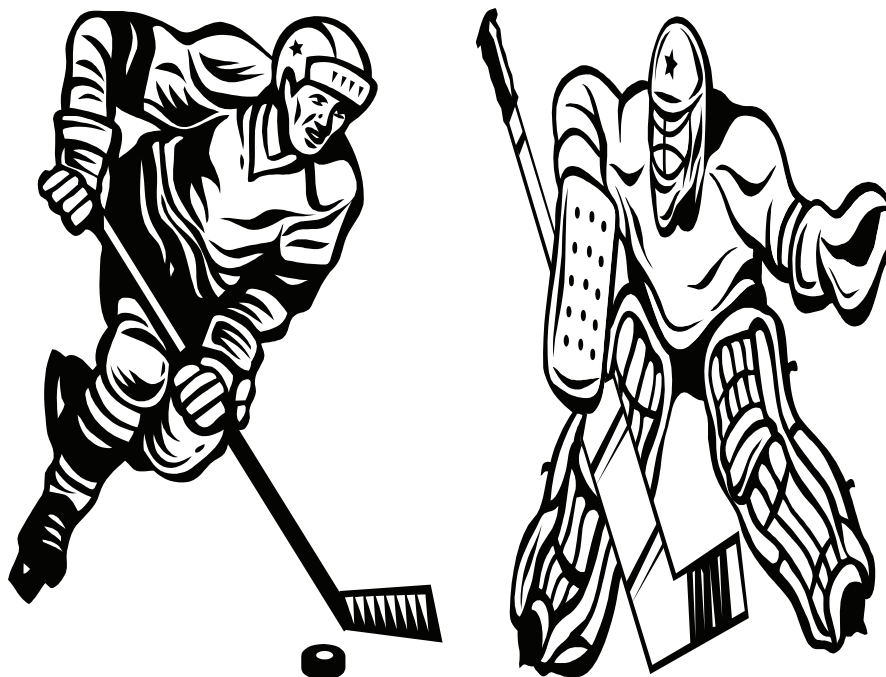
Friday

****Winter Season Starts **
October 9, 2009**

The World Division is limited to 35 skaters and 2 goalies.

Session will fill up so register early.

Cost for League Participation
\$160.00 per player



The World Division is designed to give participants, who are new to the game of hockey, a favorable learning atmosphere. The World Division is for adults who have less than 5 years playing experience. Teams are formed at the beginning of each week in order to create a community atmosphere rather than a competitive mentality. Players should bring a light and dark jersey to each session.

Each skate operates like a closed Drop-in.

The World Division has room for 35 players.

Space is limited so register early!

Call (801) 966-0223 for more information

West Valley Acord Ice Center
5353 W. 3100 So.
West Valley, UT 84120
www.acordice.slco.org



World Division Drop-In Hockey League– October 2009

***Starts October 9th
16 Weeks of Games***

Time: Fridays at 9:45pm to 11:15pm

(Note: the time for the following dates October 23rd, December 11th & February 5th might be 10:15pm to 11:45pm. A season schedule will be provided the first night.)

Registration Form

Name _____ **Age** _____ **DOB** _____

Address _____ **City** _____ **Zip** _____

Home Phone _____ **Work Phone** _____ **E-Mail** _____

In Case Of Emergency, Notify

Name _____ **Phone** _____

**Statement of Agreement\
Assumption of Risk, Liability and Refund Policy**

1. **Release and Indemnification:** I hereby recognize and acknowledge that my or my child's participation in recreational activities may involve bodily and /or emotional injury to myself or my child. In consideration of myself or my child being able to participate in such events I for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly indemnify and hold harmless, defend, release, waive and discharge Salt Lake County and its officers, employees, and volunteers from any and all suits, claims or liabilities, including negligence based on any injury except that caused solely by the willful misconduct of Salt Lake County, that may result from myself or my Childs participation in Salt Lake County Parks and Recreation activities. In addition, I agree that I or my insurance company will pay for medical, hospitalization or any other expenses resulting from my or my Childs participation.
2. **Refund Policy:** As per Salt Lake County policy and procedures, the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. All refunds must be requested in person and accompanied with a written request. No refunds shall be given after the first day of the program.
3. **Collections:** I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred to the Salt Lake County Attorney's Office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake County Attorney for collection.
4. **Emergency Treatment:** I hereby authorize Salt Lake County Parks and Recreation program staff to act on behalf in accordance with their best judgment in case of an emergency involving myself or my child, and agree to assume full responsibility for all expenses, medical or otherwise that may arise there from. I understand that I or my insurance company will pay for such emergency treatment.
5. **Equal Opportunity:** Salt Lake County Parks and Recreation provides equal opportunity to participate regardless of race, creed, gender or ability to pay and will, upon request, provide reasonable accommodations to individuals with disabilities.
6. By signing this assumption of risk, liability release, indemnification and refund policy statement, I acknowledge that I have read its contents and discloser.

Signature _____ **Date** _____

Receipt # _____ **Amount** _____ **Date** _____ **Int.** _____