



**Niles Township Nighthawks Hockey Club**

**Player Evaluations Fall-Winter 2011-2012**

USA Hockey # \_\_\_\_\_

Name \_\_\_\_\_ Phone-Home \_\_\_\_\_

Street \_\_\_\_\_ Phone-Cell \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ E-Mail \_\_\_\_\_

Current School \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current Team \_\_\_\_\_ Position \_\_\_\_\_ Player Level \_\_\_\_\_

**Player Requirements**

Evaluations are open to all players who will be attending either Niles North, Niles West, or Ida Crown Jewish Academy High Schools for the 2011/2012 school year. All players must register and pay the USA Hockey membership fee online at [www.usahockeyregistration.com](http://www.usahockeyregistration.com). In order to attend evaluations, you must bring a printed copy of your **USA Hockey Membership (WITH BARCODE)**, **Proof of Health Insurance** (copy of insurance card), and **Evaluation Fee Payment** to the first session you attend or submit them with your registration.

**Nighthawks Player Evaluation Fee \$250.00 Goalies \$125.00**

(Fee will be applied to season fees upon registration)

**Evaluation Schedule**

Monday	Aug. 29th	9:10 PM	American Heartland
Thursday	Sept. 1st	9:00 PM	Winnetka Ice Arena

There will be a MANDATORY parents meeting held during the evaluation session on Thursday September 1st once the players take the ice to answer any questions you may have.

**Parent or Guardian**

Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone-Home \_\_\_\_\_

Street \_\_\_\_\_ Phone-Cell \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ E-Mail \_\_\_\_\_

Release and hold harmless agreement: Participants 18 years of age or older and parents of participants under the age of 18 should read this form carefully and be aware that in signing up and participating in this program, you will be waiving and releasing all claims for injuries and damages you might personally sustain which might arise out of this program. As a participant in this program (or as a parent of a minor participant), I recognize and acknowledge that there are certain risks of physical injury associated with such participation, and I agree to assume the full risk for any injury, damages, or loss that I may sustain as a result of participating (or of my minor child's participation) in such a program as against the Niles Township Nighthawks Hockey Club, it's officers, agents, servants, and employees, from any and all claims from injuries, damages, or loss which I may have or which may accrue to me on account of my participation (or of my minor child's participation), in the program. I further agree to indemnify, hold harmless, and defend the Niles Township Nighthawks Hockey Club, it's officers, agents, servants, and employees, from any and all claims resulting from damages, and losses sustained by me and arising out of, connected with, or in any way associated with the activities of the program (or of my minor child's participation in the activities of the program). I have read and fully understand this Release and Hold Harmless Agreement and any program details provided to me. It is mutually understood that the facsimile registration document (including waiver and release of all claims) shall substitute for and have the same effect as the original form.

Participants Signature & Date \_\_\_\_\_

Parent/Guardian Signature (if participant is under 18)/Date \_\_\_\_\_