



2012-2013

REGISTRATION PACKAGE

Returning Penguin Players & Non-DVHL registered players: Can complete their registration form and turn in before evaluations.

New Players who were registered with another DVHL Team in 2012-2013 will have their registration applications accepted as follows:

All levels of players after 5:00 pm on April 10, 2012

Evaluations: April 10, 2012 6:50pm & April 11, 2012 6:00pm

**2012-2013 Pond Penguins
FORM CHECKLIST**

Registration forms will not be accepted unless ALL required documents are submitted. All forms listed are required by the Pond Penguins. Updated forms may be required prior to the season if updated by USA Hockey, the D.V.H.L or the Pond Penguins.

Note: (1) All players must register themselves with USA Hockey and provide proof of 2012-2013 registration before the start of the season. **Failure to do so will prohibit the player from participating in any Penguins events until the registration is received.**

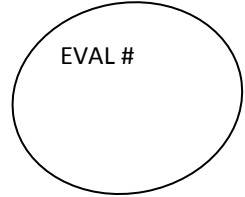
Returning and New (non-returning) Players	Check Box	Ducks Use Only
• Registration Fee		
• Registration Form		
• Registration Agreement / Financial Commitment		
• Player Code of Conduct		
• Parents Code of Conduct		
• DVHL Player/ Parent Agreement		
• USA Hockey Consent to Treat and Medical Form		
• USA Hockey Waiver of Liability		
• Copy of USA Hockey Card or Copy of USA Hockey Online Registration Form (1)		
New (non-returning) Players (These forms are in addition to those listed above.)	Check Box	Ducks Use Only
• Copy of Birth Certificate		
•		
• Copy of USA Hockey Card or Copy of USA Hockey Online Registration Form (if player is currently registered with USA Hockey) (1)		



2012-2013 SEASON REGISTRATION

POND PENGUINS HOCKEY

EVAL #



PLAYER INFORMATION

LAST NAME:		FIRST:	<input type="checkbox"/>	<input type="checkbox"/>	MI:
DATE OF BIRTH: / /		GENDER: M F			
ADDRESS LINE 1:					
ADDRESS LINE 2:					
CITY:			STATE:		ZIP
P/G 1 LAST NAME:			FIRST:		
P/G 2 LAST NAME:			FIRST:		
P/G 1 PHONE:		P/G 1 PHONE:			
P/G 2 PHONE:		P/G 2 PHONE:			
P/G 1 EMAIL:					
P/G 2 EMAIL:					
GENERAL INFORMATION					
IS PLAYER A RETURNING PENGUIN? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, 11/12 TEAM:					
PENGUIN SIBLING ? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, TEAM LEVEL					

SEASON FEES: A \$300 season fee payment is due at time of registration. All seasons fee payments are non-refundable. All players will be responsible for individual registration with USA Hockey. Electronic registration with USA Hockey begins, July 1, 2012. Proof of registration must be submitted to the Pond Penguins before season practice begins.

REGISTRATION AGREEMENT / FINANCIAL COMMITMENT

In compliance with the Bylaws of the Delaware Valley Hockey League (DVHL) and Atlantic Amateur Hockey Association (AAHA):

No player may step on the ice of a DVHL club unless the player and the player's parent/guardian have signed a registration agreement to play for and or be financially committed to that club for the intended season.

Once a player has signed a registration agreement to play for and/or be financially committed to the club, that player can then be evaluated to play on a team with that club.

Clubs may cut players from their program only where the number of players at any particular age level makes the formation of a team a financially impractical situation. Assigning a player to an in-house team (either club-sponsored or rink sponsored) is permitted and is not considered the same as cutting a player.

Any player who signs a Club registration form and/or makes a financial commitment to that club will remain the property of that Club for the balance of the season, unless released by that Club in writing

- Verbal releases will be permitted, provided the verbal release is given to the appropriate Vice President of that level, Commissioner, or member of the Executive Committee.
- A written AAHA release must follow. However, this player must be rostered by December 31 of that playing season (February 10 for Juniors)
- Should a player not be able to obtain a release from his Club, he/she shall have the right to appeal to the Executive Committee, whose decision shall be binding.

I hereby acknowledge the above rules and regulations of the DVHL Bylaws. I am not registered with any other DVHL Club for the 2012-2013 season. I agree that I am now registering to play with the Pond Penguins and be financially committed for the 2012-2013 season.

Print Player Name _____

Player Signature _____

Print Parent/Guardian Name _____

Parent/Guardian Signature _____

Date _____

PLAYER CODE OF CONDUCT

As a Pond Penguins Youth Hockey player, I understand that I am a representative of the Delaware Ducks Youth Hockey Association and will conduct myself within the governing rules, regulations and policies of USA Hockey, Delaware Valley Hockey League (DVHL) and Atlantic Amateur Hockey Association (AAHA) by-laws. As a Pond Penguins representative, I will agree to:

1. Adhere to USA Hockey, DVHL and AAHA rules, regulations and policies as well as by-laws and decisions as determined by the Pond Ice Arena.
2. Treat players, opponents, coaches, parents and other fans- regardless of race, sex or creed- with respect, relative to abusive language, actions, and gestures.
3. I will not argue with an official's decision. I will treat officials as honest in their intentions and accept official decisions without becoming angry. I will not display temper outbursts, throw things or bang the glass
4. As a Penguin player I will be on time to all games and practices. Be physically and mentally ready to work hard to improve my skill, ability and effort.
5. Give coaches advance notice of upcoming tardiness or absences.
6. Respect the Pond Ice rink and its employees, as well as facilities we are visiting.
7. Learn TEAMWORK, SPORTSMANSHIP, DISCIPLINE and RESPECT while playing for fun. Be a TEAM PLAYER- get along with my teammates. Appreciate and support the contribution each person makes to the team.
8. Learn the rules of hockey and play by them. Always be a good sport and set a good example. Understand that any behavior that reflects poorly on my team or the Pond Penguins may result in disciplinary action as decided by coaches and/or the The Pond Ice Arena Management team.
9. As a Pond Penguin player I understand that winning is desirable, but winning at all cost defeats the purpose of the game. I will learn to win or lose with class, dignity and sportsmanship.

BY SIGNING BELOW I UNDERSTAND THAT A VIOLATION OF THIS CODE OF CONDUCT OR ANY ACTION WHICH IS DETRIMENTAL TO THE CLUB WILL RESULT IN MY SUSPENSION OR TERMINATION FROM ANY OR ALL POND PENGUIN YOUTH HOCKEY ACTIVITIES.

Print Player Name _____

Player Signature _____

Date _____

PARENTS CODE OF CONDUCT

As a parent of a Pond Penguins Youth Hockey player, I understand that I am a representative of the Pond Penguins Youth Hockey Association and will conduct myself within the governing rules, regulations and policies of USA Hockey, Delaware Valley Hockey League (DVHL) and Atlantic Amateur Hockey Association (AAHA) by-laws. As a Pond Penguins representative, I will agree to:

1. Adhere to USA Hockey, DVHL and AAHA rules, regulations and policies as well as by-laws and decisions as determined by the The Pond Ice Arena Management team.
2. Be a positive role model to the players, display emotional maturity and be alert to physical safety of players.
3. Promote and maintain a drug and alcohol free sports environment for the team.
4. Treat players, opponents, coaches, officials, parents and other fans- regardless of race, sex or creed- with respect, relative to abusive language, actions, and gestures.
5. Show a positive attitude toward the game and all of it's participants by not yelling at players, coaches or officials. Encourage my child to play by the rules.
6. 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. This will also encourage young officials to improve and not be discouraged. Any criticism of officials only hurts the game.
7. Applaud a good effort in both victory and defeat, and enforce the positive points of the game. Never yell or physically abuse my child after a game or practice. Work toward removing the physical and verbal abuse in youth sports.
8. Recognize the importance of volunteer coaches. They are important to the development of my child and the sport. Communicate with them and support them, but leave the coaching to the coaches. DO NOT COACH FROM THE STANDS.
9. Not be critical of the hockey program, other players and coaches in front of my children or other players and parents. If I a have a problem, I will speak in a rational manner directly to the coach or member of of the Pond Ice Arena management team.

BY SIGNING BELOW I UNDERSTAND THAT A VIOLATION OF THIS CODE OF CONDUCT OR ANY ACTION WHICH IS DETRIMENTAL TO THE CLUB WILL RESULT IN MY SUSPENSION OR TERMINATION FROM ANY OR ALL POND PENGUINS YOUTH HOCKEY ACTIVITIES.

Print Parent/Guardian Name

Parent/Guardian Signature

Date



DELAWARE VALLEY HOCKEY LEAGUE (DVHL) PLAYER/PARENT AGREEMENT

This AGREEMENT is entered into in the Commonwealth of Pennsylvania between

_____, born on _____

(“The Player”) and jointly and severally by the Player’s parent and/or legal guardian,

_____, residing at _____,

(“The Parent”) and _____ (“The Club”), a youth hockey

organization for the 2012-2013 hockey season, which is defined as lasting from the date of signing of this agreement until the completion of the USA Hockey National Tournaments (“The Season”). It is understood that the Parties **intend to be legally bound by this Agreement**, and that this Agreement was signed in, and is enforceable, in the Commonwealth of Pennsylvania, and that all references to the Player includes males and females.

1. **The Parent understands that if the Player resigns or otherwise voluntarily terminates his/her participation for any reason after signing this agreement, the Player is not entitled to a refund of the Player Fee and must pay the entire remaining balance of the Player Fee before a DVHL/Atlantic District Player Release Form will be issued.**
2. The player agrees to play DVHL amateur ice hockey exclusively for the above mentioned Club and may not register for, be evaluated for or play for any other DVHL club. The player may also participate with any school, independent or Atlantic District run program. Dual rostering is not permitted on any Tier I (AAA), Tier II (AA, A, B, C) or any Junior Programs; however, Girls are permitted to be dual rostered on any Tier I (AAA), Tier II (AA, A, B, C) or Girls team. If both teams are National Tournament bound, the player must declare, in writing, by 12/31/2011, for which team she will participate should these teams qualify for Districts, leading to the National Tournament.
3. The Player agrees that he/she will attend all of the Club’s ice practices, games, off-ice training, instructional sessions and organized team meetings, except when prevented from doing so for educational or medical reasons, in which case, the player will request permission in advance (when reasonably possible to do so) to be absent. The club acknowledges that such permission will be granted for all reasonable requests. The player agrees that he/she will maintain his/her academic and educational course work at the/she highest-level possible.
4. The Club will provide the Player USA Hockey and Atlantic District registration unless the player has been previously registered by another organization.
5. The Player agrees to obey the laws of the Commonwealth of Pennsylvania and that he/she will maintain good citizenship and behavior at all Club events, as well as in his/her everyday life, recognizing that his/her behavior is a reflection upon the Club.
6. The Player agrees not to use vulgar or profane language, racial, ethnic or gender related slurs toward teammates, coaches, officials, opponents or spectators.
7. The Player agrees that alcohol, tobacco products, and all legally banned substances, which includes marijuana, cocaine, non-prescribed medications, including performance enhancing substances and other related drugs, have no place in hockey and Player agrees not participate in such use.
8. The Player recognizes that there is no place for violent or overly aggressive play in hockey where the obvious intent is to injure or harm another player, and agrees not to participate in such conduct.
9. The Parent agrees to respect and show appreciation for the volunteers who give their time to hockey. Parent further agrees not to yell, taunt, threaten or inflict physical violence upon any player, coach, official or spectator at any Club function.
10. The Parent agrees to be responsible for the financial commitment made in this Agreement (which includes the payment of a Registration Fee and a Player Fee), even in the event that Player’s Club or playing privileges are suspended and/or terminated for any reason, including but not limited to disciplinary or academic issues, injury or illness, and understand this to mean that in no case will the Player Fee be prorated for any portion of the season.



USA HOCKEY
CONSENT TO TREAT

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:

Name of Insurance Company: _____

Address: _____

Policy Number: _____

Signed: _____

(Parent/guardian or adult participant)

Relationship to Participant: _____

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 Winnie Tharp, Marsh USA, Inc., (317) 261-9306.

To file an excess accident claim, call K&K, (800) 237-2917, ext. 5623.

MEDICAL HISTORY FORM

Name: _____ Date: _____
Address: _____ Birthdates: _____
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: _____ 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? Yes No If so, when? _____

Are you currently taking any medication? Yes No What? Why? _____

Has the doctor placed any restrictions on your activity? Yes No Explain: _____



Waiver of Liability, Release Assumption of Risk & Indemnity Agreement

It is the purpose of this agreement to exempt, waive and relieve releases from liability for personal injury, property damage, and wrongful death, including if caused by negligence, including the negligence, if any, of releases. "Releases" include USA Hockey, Inc., its affiliate associations, local associations, member teams, event hosts, other participants, coaches, officials, sponsors, advertisers, and each of them, their 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 being allowed to participate in USAH events and member team activities, participant (and the parent(s) or legal guardian(s) of participant, 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 events, member team activities, the sport of ice hockey, and/or activities incidental thereto, whenever or however they occur and for such period said activities may continue, and by this agreement any such claims, rights, and causes of action that participant (and participant's parent(s) or legal guardian(s), if applicable) may have are hereby waived, released and relinquished, and participant (and parent(s)/guardian(s), if applicable) does(do) so on behalf of my/our and participant's heirs, executors, administrators and assigns.

Participant (and participant's parent(s)/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 there from and that I/we have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant or the negligence of others, including the "releases" identified below. 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)/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 the preceding paragraph. I/We agree to abide by and be bound under the rules of USA Hockey, including the By-Laws of the corporation and the arbitration clause provisions, as currently published. Copies are available to USA Hockey members upon written request.

Participant (and participant's parent(s)/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, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said rinks, for negligent selection of certain releases, or negligent supervision or instruction by releases.

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)/guardian(s), if applicable) agree if any claim for participant's personal injury or wrongful death is commenced against releases, he/she shall defend, indemnify and that save harmless releases 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.

Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releases, 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) This form is to be retained by local program.

DELAWARE VALLEY HOCKEY LEAGUE
CODE OF CONDUCT ACCEPTANCE FORM FOR 2011-2012 SEASON

NAME OF CLUB: _____

NAME OF PLAYER: _____

TEAM OF PLAYER: MITE SQUIRT PEEWEE BANTAM MIDGET 16 MIDGET 18

LEVEL OF TEAM: AA A B MITE

Parental/Guardian DVHL Code of Conduct Pledge

- We will show respect and support for coaches and officials, prior, during and after the game.
- We will ensure that our child behaves in a sportsmanlike manner.
- We will demonstrate respect and support for all players and families, including opponents' before, during and after the game.
- We will be mindful of the need for player development over the need to win.
- We will ensure that our child not use performance-enhancing drugs.
- We will refrain from coaching or instructing any players during a game or practice unless I am their official coach.
- We will abide by the rulings of the officials and coaches and league administrators during and after the game.
- We will demand and demonstrate a healthy sports environment by refraining from alcohol and tobacco use during all sporting events.
- I have read and understand the DVHL Code of Conduct and pledge to follow the code and the policy regarding acceptable behavior. I will accept and support the league sanctions imposed to foster a sportsmanlike atmosphere on behalf of myself, my family, my player and any spectators that are associated with my family

Signed:

_____ (Parent/Guardian)

Date: _____