



MID-WEEK 3 on 3

Fall/Winter 2015/16 League

“FASTEST GAME ON ICE”

RICHMOND HILL - NTR

**FOUR DIVISIONS – TYKE-2009/10, NOVICE-2007/08,
ATOM – 2005/06, PEEWEE –2003/04**

- Games to be played on Wednesday Nights
- 31 Weeks – 25 Game Season
- 6 Skill development sessions
- **Every 4th week 1.5 hours of ice time**
- **Start Date September 9th, 2015**
- **End Date April 6th, 2016**
- No games
- Rapid line changes, Non Stop action
- **Dramatically improves skills**
- 45-minute games
- 9 Players & 1 goalie per team
- We reserve the right to balance teams
- Parent volunteers welcome
- Individual entries
- Sweaters & Socks Included
- Prizes for all participants
- **REGISTER EARLY – Limited Space**

Registration Fee \$775.00 plus HST

For further information call 905-884-1121 or e-mail info@ntrcanada.com

Name: _____ Parent's Name(s): _____ Parent will assist in Coaching _____

Address: _____ City: _____ Postal Code: _____ Division: _____

Email: _____ Date of Birth: _____ Phone(H): _____ Cell: _____

Male: ___ Female: ___ Position: _____ Division _____ Paid: Cash _____ Debit _____ Visa/MC _____ Cheque _____

Visa/MC # _____ Expiry Date: _____ VIN# _____ Amount _____

Waiver of Liability: The student applicant on the application and his/her parents/guardians agree that the National Training Rinks (N.T.R.), shall not be held responsible for any injury, loss or damage whatsoever occurring to the participant while he/she is in attendance at N.T.R. programs or including while he/she is within the premises occupied by N.T.R.

I/We acknowledge and agree that N.T.R. reserves the sole and exclusive right to use any photographs or videos taken during the program for advertising and/or instructional purposes, without cost or charge to N.T.R. and the I/We consent to photographs or videos being taken for the purposes contained herein. I/We consent to his/her or my attendance on the terms of this waiver of liability or in the case of a guardian of a person under 19 years of age grant our consent to the terms of this waiver.

I/We acknowledge reading this Application and Declaration and understand the conditions contained herein and agree to abide by all terms.

DATE: _____ SIGNATURE: _____ PRINT NAME: _____

**Phone 905-884-1121 www.ntrcanada.com Fax 905-884-1145
650 Edward Avenue, Richmond Hill, L4C 0S1**