

ESP Select Hockey
New Player Information and Registration Form

Dear Prospective League Player and Parent(s),

If you have printed out this registration form from our web site and do not have an authorization code from your coach, please contact the league office. If you have been issued this registration form by a league scout or by a coach from one of the league teams, you have been asked to participate in the ESP Select Hockey league this upcoming season. Please have your parent or guardian fill out this form and then mail it along with a check for \$345 to the address below. This form serves as official intent to participate in the league. By completing this form, you will be placed on a protected player roster and assigned to the appropriate team. You will soon be notified that a spot has been reserved for you on the team you have designated. The deposit is due by February 1st 2008 and will be applied to the league fee of \$645 (\$475 for goalies). The remaining \$300 balance (\$130 for goalies) will be due by March 1st 2008. The league deposit and or the balance of league fees will of course be graciously accepted prior to these dates if you're so inclined. Your coach will be notified of your registration by the league and will contact you regarding the upcoming season at a future date.

The league must receive deposits for new players by February 1st 2008. If you have been offered a roster spot on a team after February 1st, registrations and deposits are due in our office within 5 business days of the offer date. Registrations via offers on or after March 1st, will need to include the full league fee. Player's will not be issued uniforms, league merchandise, or be allowed to skate with the team until the entire league fee balance is paid, no exceptions. ESP Select Hockey LLC. reserves the right to actively recruit new players for unpaid roster spots after March 1st 2008.

Player Name _____ Date of Birth ____/____/____ Sex M F

Team Name _____ *Coach* _____

Offer Date ____/____/____ *Coach Authorization Code* _____

Requested Participation Level 1997 AAA 1996 AAA 1995 AAA 1994 AAA

Most Recent Association _____ Level _____ Previous Elite Team (if applicable) _____

Parent/Guardian Name(s) _____

Address: _____ State: _____ Zip: _____

Home Phone: () _____ Work Phone: () _____ Parent Email: _____

The above information must be filled out accurately and in it's "entirety" for your league application to be processed and acceptance into the league to be granted. By signing this registration form, you agree to all rules set forth by the league and hold harmless and indemnify ESP Select Hockey from any claim whatsoever. The total league fee is \$645 (\$475 for goalies) and is due as previously outlined. Players will be placed on teams on a first come first served basis. Receipt of the \$345 deposit will secure your spot on the selected team. No refunds of league fees will be granted unless we are unable to provide placement of your skater. Parent or guardian also agrees to provide a signed league injury liability waiver. The registration form, deposit, and waiver should be mailed in together.

Parent Signature: _____ Date ____/____/____

We exclusively accept checks as payment for league fees. Thank you for helping us keep league fees low, by reducing credit based transaction costs. **Please make checks payable to ESP Select Hockey.** Mail the check and registration form to:

ESP Select Hockey
P.O. Box 25293
Woodbury, MN. 55125

Please contact our league office at (651) 714-8500 or email us at davew@espselecthockey.com with your questions or concerns.