

play hockey! CJTHL

JOIN FLEMINGTON-RARITAN YOUTH HOCKEY

Get Out On the Ice this Winter and
have Fun Playing with Your Friends!

INTRO TO HOCKEY

**Boys &
Girls !**

WINTER I SESSION

November 3rd- January 8th
Cost: \$225

Thursdays, 4:45-5:45pm OR
Saturdays, 8:45-9:45am

ASPEN ICE- FLEMINGTON

**NO SKATING OR HOCKEY
EXPERIENCE NECESSARY !!**

**ALL EQUIPMENT AND SKATES
PROVIDED !!**

The CJTHL encourages everyone to try skating- it's healthy and fun!!

Bring a friend to public skating at Aspen Ice. Buy one Admission, get your buddy in for free!! *

Just Present this flyer when you come

*Skate rentals not included.

**For League Information,
visit www.cjthl.com**

Practices and games held at
Aspen Ice Arena, 426 Case Blvd,
Flemington, NJ 08822

For program questions, please e-mail info@cjthl.com or call 732.940.6800, Fax 732.940.9970
CJTHL, PO Box 288, Princeton, NJ 08542. The CJTHL is a youth not-for-profit 501(c)3 organization.

INTRO TO HOCKEY

Winter / 2011 Session

FLEMINGTON-RARITAN YOUTH HOCKEY

TO REGISTER:

1. CHOOSE DAY & TIME 2. FILL OUT THE FORM BELOW & MAIL, FAX or visit www.cjthl.com to register on-line

Class: Day: _____ Time: _____

Name: _____ Parent/Guardian: _____

Age: _____ Gender (circle one): M F DOB: _____

Email (required): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell/Work Phone: _____

WAIVER OF LIABILITY / INSURANCE MUST BE SIGNED TO PROCESS REGISTRATION.

In consideration of (participant's name) being permitted to register and participate in the Central Jersey Town Hockey League (CJTHL) Hockey classes, we do hereby release and discharge CJTHL directors, agents, employees and any person or corporation or partnership connected herewith from all manner of action, injury, damages, costs, claims or demands which we will, shall or may hereinafter have, suffer or receive by reason of such participation in any program at the center. This release shall be binding on our heirs, assigns, executors and administrators. It is further agreed that CJTHL shall not be considered to guarantee or warrant such equipment as may be used in the conditioning of said programs. The undersigned also agrees that their likeness or the likeness of their child may be photographed or videotaped and that such image may be published in an outlet used to promote or publicize the program. In the event of cancellation, all monies are non-refundable; there are not exceptions. All applications require parent/guardian signature. Times and days may change due to enrollment, special events, etc. Central Jersey Town Hockey League may register my child, if born in 2005 or later, for a USA Hockey membership. There will be no additional charge for this.

If born in 2004 or before, the above-named participant must purchase a USA Hockey membership to register in the hockey program at CJTHL (birth year 2004 & older - \$40/year; birth year 2005 & younger - FREE)

Parent Signature: _____ Date: _____
(I have read & fully understand the waiver of liability & insurance requirement)

METHOD OF PAYMENT (circle one): cash check* VISA/MC AMEX Discover

Credit Card #: _____ Exp. Date: _____

Name as it appear on card: _____

Signature: _____ **make checks payable to Flemington Raritan Youth Hockey*

CJTHL CREDIT/REFUND POLICY - NO CASH REFUNDS. If a participant is unable to complete a class due to an injury & has written proof from a doctor, an in-house credit will be given for the unused portion of the session. The in-house credit may be used for any program at CJTHL. **THERE ARE NO CREDITS FOR MISSED CLASSES.** Participants may make up to two missed classes at any other class day and time. Any participant dropping out of a program at CJTHL, not due to injury (as stated above), will still be responsible for paying the entire session fee.

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