Hudson Youth DekHockey League Inc. 2023 Registration Form

To register by Mail: Hudson Youth DekHockey, PO Box 210 Hudson MA 01749

Season playing:	Spring Season _	Fall Season:	
(Check all that apply) Skill Level: New Player	_ Ice Hockey Player	Former All-Star Returni	ng Player Goalie
Registrant's Name: Birth year		h year	
CityAd	dress Phone (1)		
Parent/Guardian Name	Phone (2)		
Address (if Different)			
Email Address	* Important for coach contacts		
Division (circle one)			
FEE: \$100	FEE: \$110		
Chipmunk	Penguin	Beaver	Cadet
Boys 2018,2017,2016	Boys 2015,2014,2013	Boys 2012,2011,2010	Boys 2009,2008,2007
Girls 2018,2017,2016,2015	Girls 2015,2014,2013,2012	Girls 2012,2011,2010,2009	Girls 2009,2008,2007,2006

BIRTH CERTIFICATES REQUIRED FOR ALL PLAYERS

Dek Hockey is a non-profit organization that relies on volunteers. Please consider volunteering! Coach ____ Asst. Coach ____ Concession _____ Team Sponsorship ____ Misc _____

Each participant must supply his/her own equipment: Stick, gloves, elbow pads, shin pads, helmet with mask.

COVID-19 RULES FOR PLAYERS AND FAMILIES

- 1. Stay home if you have tested positive for Covid-19, are showing symptoms of Covid-19, are waiting on test results or have had a close contact* with a person who has tested positive or has symptoms of Covid-19.
- 2. If notified of a Covid-19 exposure, please let Hudson Youth DekHockey know immediately at either (978)310-1989 or HudsonYouthDekHockey@gmail.com Staying on top of contact tracing is a crucial part of safety protocols.
- 3. Players: Please bring a well labeled water bottle. No sharing water.
- 4. Players: Tell a coach if you do not feel well.
- 5. Additional precautions may be added if required by national, state, or local agencies.

*Close contact is defined by CDC as someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time the patient is isolated. https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html

NOTICE TO PLAYERS, PARENTS, AND GUARDIANS:

Players must wear helmets at all times while on the rink for any of our events: This includes, but is not limited to, placements, practices, pre-game warm-ups, games, skill competitions, or any other events of any kind. This rule also applies to siblings or other non-registered children during any of our events. Violators are subject to disciplinary action, up to and including suspension from the league.

NOTICE TO PARENTS, GUARDIANS, AND OTHER SPECTATORS:

Be aware that the DekHockey balls and sticks can leave the rink during play, presenting a potential hazard to spectators. Use caution and remain alert while in the vicinity of the rink.

PHYSICAL INJURY AND HOLD HARMLESS AGREEMENT

The Parent /Guardian of the child listed above is requesting participation in a physical sport known as Deck Hockey at the Deck Facility. I understand deck hockey is a physical contact sport and know that I'm assuming any and all risks of injuries including but not limited to death incidental to participation in such a physical contact sport, either as a participant and/or spectator. I am fully aware that physical collisions between or among players in this sport are common and physical injuries can result. I accept any or all hazards of participation in said sport & the dangers of injury including but not limited to injuries or damages arising from the negligence or carelessness of fellow players, referees, staff, participants and board members. I am also aware that deck hockey is played outdoors under various weather conditions, which may cause the surface to become slippery. I am also aware that the floor on which the sport is played may come apart under certain conditions, and that collisions with the surface, the retaining walls, net, or structures on or near by playing area may result in injury.

I ACCEPT ALL THE HARZARDS AND RISKS OF PARTICPATION IN THE PHYSICAL CONTACT SPORT AND HEREBY WAIVE RELEASE, ABSOLVE, INDEMNIFY AND AGREEE TO HOLD HARMLESS, the organizers, the board members, sponsors, supervisors, participants, coaches, referees and the Town of Hudson as well as any and all providers of equipment or services to the facility as well as any person or entities transporting me to or from the activities, from any claims, actions, lawsuits or other proceedings arising from any use by me of the deck hockey facility whether or on the course of the organized play, or while I am at a deck hockey facility, or being transported to a or from a facility, including, but not limited to any and all injuries ensuing as described above. I further understand and agree the in event that litigation is instituted against any or above protected parties, I shall indemnify and hold harmless from any and all costs of defending such claim, including but not limited to all reasonable attorney fees or costs involved. I understand and agree that it is my responsibility to learn, understand and obey the rules governing play, including any special written rules of the Hudson Youth DekHockey League and/or the Town of Hudson. I further understand and agree any players violating any such rules are subject to suspension in the sole discretion of the board of the Hudson Youth Dekhockey League with no money refunded to me.

I am a parent/legal guardian of the above-named applicant. I herby give my approval and consent to my child's participation in the physical contact sport of DekHockey and in any and all league activities at the deck hockey sports facility. I have completely read this physical injury waiver and hold harmless agreement and fully understand the risk involved to my minor child as result of his/her participation in said sport and herby assume the risks attendant hereto. I further agree on behalf of my child to be bound by the previous provisions of the PHYSICAL INJURY AND HOLD HARMLESS AGREEMENT. I also agree that my child and his legal guardians will abide by the Code of Conduct found on www.hudsondekhockey.com.

I HEARBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THIS DOCUMENT. MY SIGNATURE WAS NOT IN ANY WAY COERCED AND I SIGN IT VOLUNTARILY AND OF MY OWN FREE WILL.

 Parent/Guardian Signature
 Date

 Registrant's Name
 Date

****** No late registrations will be accepted. See Flyer for registration dates and times. ****** ****** Registration fees are non-refundable after team placements *****