

Recreational Sports Inc.
Registration form for Golden Eagles

Season: September 2011 to March 2012

Golden Eagles - Over 40 Draft League. One Division. 56 Games. Two games per week. Sunday, Tuesday & Wednesday nights at **Arctic Pond and Arctic Edge Arenas.** September 11, 2011 to March 28, 2012.

Cost : \$1310 per player. Plus \$28 insurance and registration fee. Unless paid in another RSPI league. Ice fee -- \$437 due by September 11, \$437 due by Nov. 13th and Jan. 15th.

Save \$80....\$1230pp – ice fee of \$615 due by September 11th and \$615 by Nov. 13th
Save \$160...\$1150pp -- total ice fee due by September 11th. (+ins & reg. fee)
Goalies and Subs: \$28 for registration and insurance.

**DEADLINE: August 28, 2011.....Or until we are filled.
\$28 insurance and registration fee due with registration**

Make checks payable to: RSPI

Mail to: Recreational Sports Inc.
John Wilson
51292 North View
Plymouth, MI 48170

WEB SITE: www.rspi.net
E-mail: john@rspi.net
Voice and Fax: 734-927-1267

Golden Eagles Fall & Winter 2011-12 Adult Hockey League

Please Print

Name: _____ Age: _____ Date of Birth: ____/____/____

Address: _____

City: _____ Zip: _____

Home Phone: _____ Cell: _____ Work # _____

E-Mail Address: _____

Play Position: _____ F= Forward, D= Defense, G= Goalie

Rating: 1= Excellent ____, 1.5 ____, 2= Good ____, 2.5 ____, 3= Average ____, 3.5 ____, 4= Beginner ____

Sub Only: _____ Send \$28 insurance fee with this form. Sub Fee is \$10 per game.

I have or can get a team sponsor: (cover cost of jersey's and socks) _____ I would like to be a Team Captain: _____

Recreational Sports, Inc. Player Contract, Waiver and Release of Liability Read Before Signing

In consideration of being allowed to participate in any way in the Recreational Sports Inc. athletic sports program, hockey leagues, related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The fee for the regular season shall be paid in regular intervals as determined by RSPI. I agree to pay the entire amount as and when due regardless as to the number of games in which I participate. If I am unable to play the entire season due to a change in residence or disability, RSPI, in its sole discretion, may waive any portion of the regular fee. I further agree to pay any and all reasonable costs and expenses of collection, including attorney fees, if necessary. In the event of an entire team entry, the team captain, organizer or similar position of the team shall be individually responsible for the collection of the individual player fees and timely remit the same to RSPI.
2. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist; and,
3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
4. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Recreational Sports Inc., Golden Blades, Golden Eagles, Silver Sticks, Lady Rockets, Rockets Adult Hockey Leagues or any other hockey leagues formed by RSPI, their officers, officials, agents, and/or employees, other participants sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS PLAYER CONTRACT, RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____ Date Signed _____

Participant's Signature

X _____

Print Name