## **Junior High School League**

2017-2018 10 East Belcher Rd, Foxboro Ma 02035 (508) 698-0505 Foxborosportscenter.com

The Junior High School League is divided into 4 levels AA, A, B, C. Junior High School teams consist of  $6_{th}$ , 7th and  $8_{th}$  grade students only. Players born in 2003 and in  $8_{th}$  grade are eligible.

#### Players with a 2003 birth year and in $9_{th}$ grade are not eligible. Players in the $5_{th}$ grade are not eligible. Players with a 2002 birth year are not eligible.

#### **League Goals**

- Consistent time block for each division week to week.
- Provide a competitive and balanced League at all divisions and levels.
- Provide an organized and detailed schedule for the entire season.
- One scheduled realignment meeting. (Possibly two)
- Provide administration, officiating and facility accommodations.

#### JUNIOR HIGH LEAGUE DETAILS:

- This is a NON-CHECK league
- League runs beginning of September 2017– March 2018
- 22 Game Season plus 1 playoff game for all divisions.
- Team Rosters due by the end of September 2017.
- FSC blackout dates TBA
- ALL TEAMS MUST SUBMIT TOURNAMENT DATES BEFORE REALIGNMENT MEETING.
- All games will be 3-17 minute running time.
- Team Standings will be posted on the FSC web site. Foxborosportscenter.com
- League will follow Junior High rules.

• The FSC league is not USA/Mass Hockey sanctioned. All teams are responsible for registering their own players if desired with USA/Mass Hockey and is not included in the tuition.

• League Cost per team is \$6,500

Payments will be as follows: June 1st (Deposit) \$1,000 August 1st \$1,100 September 1st \$1,100 October 1st \$1,100 November 1st \$1,100 December 1st \$1,100

# Foxboro Sports Center Jr. High League 10 East Belcher Road, Foxboro MA 02035

### 2017-2018 Season

Town/Team Name:			
, 5	stering must have individual paper	· ·	
If there is more than one tea	am per town/organization please name	e teams using a color or coaches name.	
Division: AA A	BC		
Registration: Check Number	Amount:	Date:	
All deposits are non-refundable. Pleas	se make check payable to: Foxboro Sp	orts Center	
Program Contact: Name:			
Billing Address:			
Town:	State:	Zip:	
Billing Email:			
Cell Phone #	н	Home#	
Head Coach: if different f	-		
Home Phone #	Cell Ph	Cell Phone #	
Work Phone #			
Email			
Assistant Coach/Mana Name:	-		
Home Phone #:	Cell #:		
Work#:			

All information must be filled out completely to be accepted for the 2017-2018 season.