

# 2018 SUMMER HEATWAVE 4 on 4 BALL HOCKEY LEAGUE

## INFORMATION & REGISTRATION

## INSTRUCTIONS

Coach Bartlett and Coach Ahern are proud to offer a Summer 4 on 4 Ball Hockey League for USA Hockey members - which will take place every **Monday & Wednesday** evening, **from July 11<sup>th</sup> through August 8<sup>th</sup>** (9 Sessions), at the **Cullinan Ice Arena (Kingsford Park Rink)**.

**Players will be accepted at each level (we encourage as many participants as possible). Players will be accepted when the completed registration form and FULL payment is received. [DEADLINE FOR ENROLLMENT IS JUNE 13.](#)**

**MITES:** The Mite level will be open to players with birth years of 2010, 2011, 2012. **All the games for this level will start at 5:00 PM.**

**SQUIRTS:** The Squirt level will be open to players with birth years of 2009 & 2008. **All the games for this level will start at 5:45 PM.**

**PEE WEES:** The Pee Wee level will be open to players with birth years of 2007 & 2006. **All the games for this level will start at 6:30 PM.**

**BANTAMS / MIDGETS:** The Bantam / Midget level will be open to Bantam players with birth years of 2005-2000. **All the games for this level will start at 7:15 PM.**

**The cost to participate at all levels is \$75. All players will receive a reversible tank top jersey to wear during play.** There will be no refunds given for those who drop out, or are unable to make game. Attendance at each session is not required as teams will be made each night dependent upon that night's attendance.

Supervision of the league will be provided by Dan Bartlett and Kevin Ahern. Players will be assigned to teams on a nightly basis by Coach Bartlett or Coach Ahern.

# 2018 SUMMER HEATWAVE 4 on 4 BALL HOCKEY LEAGUE REGISTRATION FORM

⌚ Registering as a Player... (circle appropriate level)

**Mite**

**Squirt**

**Peewee**

**Bantam**

Players will participate at the level in which they will play during the upcoming (2018-2019) regular season.

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ Gender: M or F

Phone: H- \_\_\_\_\_ W- \_\_\_\_\_ C- \_\_\_\_\_

Email: \_\_\_\_\_

Jersey Size: Youth – S M L XL Adult – S M L XL

Emergency Contact - Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Allergies and/or any medical conditions the coach should know about:

---

Mail Completed Forms with payment of: \$75.00 by June 1<sup>st</sup> to:

Dan Bartlett  
143 Hillside Ave.  
Oswego, NY 13126

Make checks payable to: Dan Bartlett