



Player Commitment Form:

As a Garden City Hockey Association Travel player, I understand that travel hockey is a competitive team activity requiring participation in dryland training, skills sessions, practices, games, and tournaments. Missing scheduled team events not only hurts the development of the player, but the whole team. If a player misses practices, games or tournaments for unexcused reasons, it can limit playing time.

I also understand that travel hockey is a competitive play situation and equal playing time is not guaranteed. Travel coaches have the right to limit a player's playing time due to lack of commitment to the team, which includes missing practices, games and team activities, due to unsportsmanlike conduct on or off the ice and due to player performance.

I understand that wanting to win on game day is worth nothing unless I have the will to prepare before the day of the game. So that I might be the best player and team member that I can be, my parents and I promise to do the following:

1. I promise to arrange my schedule so that I can come to practice regularly and on time, and to participate in scheduled games and tournaments. If I am going to be late or cannot attend I promise to notify my coach.
2. I promise to work hard at practice to improve my hockey skills and my understanding of the game.
3. I promise that at dryland, skills sessions, practices, and games, I will give my coaches or trainer my full attention. When my coaches or trainer are talking, I will stop talking, keep my ears open, and my eyes on the coaches. I will not distract others during the practice session.
4. I promise that if I/My parents have an issue to discuss with my coach, we will discuss it in private with the coach - - not during or immediately following a game.
5. I promise to play the position selected by the coach to the best of my ability and for the good of the team.
6. I promise to always encourage, and never to criticize my teammates - - at practice, in the locker room or during games. I also promise to respect my teammates, coaches and opponents.
7. I promise to always hustle, and never quit, until the game is over.
8. I promise to come to each game, on time, well rested, and with a commitment to my coach and team. There is joy in winning, but pride develops in doing your best whether winning or losing.

PLAYER (please print name): _____

PLAYER SIGNATURE: _____

PARENT SIGNATURE: _____

DATE: _____



Parent Acknowledgement Form

I acknowledge that I am the parent or legal guardian of the player(s) I am registering with the Garden City Hockey Association (GCHA), and hereby consent and agree to the following terms and conditions of membership in the GCHA with respect to each player registered by me:

- Each player must be duly rostered on a GCHA team and shall play as a member of such team in the GCHA.
- Each player is expected to participate in all regularly scheduled team games, practices, and functions.
- All participants (whether player, parent or legal guardian) shall abide by the GCHA By-Laws, Policies and Procedures, applicable Rules and Regulations of MAHA and/or USA Hockey, and all rules duly adopted by the team on which the player participates.
- I understand and agree that, as the parent or legal guardian of the player(s) that I am financially responsible to the GCHA and the team on which each player is rostered for each player's pro-rata share (based on the total number of players on the team for most charges), of all dues, fees, expenses, charges or other costs imposed by GCHA or the team, as well as any individual charges imposed by GCHA or the team, in connection with the players association with such team and the GCHA during the hockey season (collectively, the "Fees"). I understand that my pro-rata may be adjusted as a result of the addition or deletion of players to the team.
- I acknowledge and agree that the team manager/treasurer will invoice me monthly for my share of the Fees. I further acknowledge and agree that such invoiced Fees shall be due upon receipt and shall be paid no later than fifteen days after receipt of the invoice.
- I acknowledge that a processing fee will be charged for any check returned by the bank for non-sufficient funds (NFS check). When a check is returned, GCHA reserves the right to require payment by money order.
- In the event that I am unable to pay any Fees, I understand that I may request a meeting with the Treasurer of GCHA and request a payment plan, which may be granted or denied in the sole discretion of the GCHA's Executive Board. Notwithstanding the grant of a payment plan, the undersigned shall remain responsible for the entire amount of the Fees.
- I understand that if the player(s) for which I am responsible withdraws, drops out or is no longer eligible to participate in the GCHA program for any reason whatsoever, including, but not limited to disinterest, injury, move, or suspension, neither the player nor the undersigned are entitled to any refund, partial or otherwise, of Fees, and shall remain responsible to GCHA and the team for the pro-rated fee schedule for early release. Any exceptions to this would be granted by the GCHA Executive Board, in its sole discretion.



- I acknowledge and agree that the failure to timely pay all Fees may, in the sole discretion of the GCHA, result in the suspension of the player’s GCHA membership and the player's loss of playing privileges. In addition, any continuing failure to pay will result in the automatic loss of membership and ineligibility to participate in all GCHA programs and activities during the upcoming season and any subsequent season until such Fees are paid in full.
- I acknowledge and agree that this constitutes a legally binding agreement to fully and timely pay the Fees, and that I shall be liable to GCHA for all costs incurred by the GCHA in collecting the Fees, including but not limited to court costs and attorney’s fees.
- I agree to pay a non-refundable commitment fee of \$300 within a time period no later than 3 weeks of signing this agreement. This initial fee will be used towards initial ice and other team fees.

PARENT (please print name): _____

PARENT SIGNATURE: _____

DATE: _____