

Vail Mountaineer Hockey Club

Parental Involvement Security Deposit Form

Please complete this form once you have registered your player with the VMHC.

Player Name: _____ Player Level: _____ Player Level: _____

Parent(s) Name(s):

Please complete this form in its entirety, and return to your Team Manager with copies of the following, prior to participation in any Club activity:

- 1st year players are required to provide a copy of player(s) Birth Certificate(s)
- Signed "Player Code of Conduct" form
- Signed "Parent Code of Conduct" form
- Signed "Photographic and Recorded Image Policy" form
- All of these forms can be located on the Club's website: www.vailmountaineers.com

Please make the appropriate selection:

Attached is a check dated March 31, 2022, payable to Vail Mountaineer Hockey Club, for the amount of \$400, and hereby authorizes the Club to process this check for failure to abide by the Parental Involvement policy.

I have completed the credit card authorization information below, and hereby authorize the Vail Mountaineer Hockey Club to process a \$400 charge, for failure to abide by the Parental Involvement policy.

I understand and agree this check or credit card authorization form will be shredded upon completion of the VMHC volunteer obligation review process.

Signature:			Date:		
Please indica	te the areas you are i	nterested in volu	nteering:		
O Coaching	O Team Manager	O Fundraising	O Website	O Uniforms	O Communication
O Sportsman	ship Tournament	O Avalanche Al	umni Weeker	nd O Saf	eSport

	Parental Credit Card A	Vail Mountaineer Hockey Club Parental Involvement Credit Card Authorization Form {All information will remain confidential.}			
Cardholder Name:					
Billing Address:					
Credit Card Type: O Visa	O MasterCard	O American Express			
Credit Card Number:					
Expiration Date:/					
Card Identification Numb	er (3-digits on the bac	k of the card):			

Amount to charge: \$400.00 (USD)

I authorize Vail Mountaineer Hockey Club (VMHC) to charge the agreed amount listed above to my credit card in accordance with the Parental Involvement & Uniform Security Deposit policy. I understand that if this charge is processed, it will not be processed until after March 31, 2022. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder: Print name, sign, and date below:

Signature: _____

Date: _____

Print Name: _____