



10 Nevins Road  
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www.icevault.com

# FALL/WINTER 2018-19 Men's Non-Checking League

September through March

TEAM ENTRY FEE - \$6,000

15 Game Guarantee Including Playoffs

Games are Sunday-Thursday nights

First Place Prize: \$100 gift certificate to In the Crease Sports Pub

Second Place Prize: \$75 gift certificate to In the Crease Sports Pub

**\$350 DISCOUNT IF PAID IN FULL BEFORE FIRST GAME**

**FINAL PAYMENT DUE BY October 15<sup>th</sup>**

**Team Roster DUE with application**

**Proof of USA Hockey Registration is due before the first game.**

*\*Game Days/Times Subject to Change\**

**ALL PLAYERS MUST BE 18 OR OLDER! TEAMS ONLY, NO INDIVIDUALS!**



## Team Information

Team Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State/Province: \_\_\_\_\_  
 Zip/Postal Code: \_\_\_\_\_  
 Jersey Color \_\_\_\_\_  
 Division:  B  C  D

## Contact Information

First Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

## Payment Information

\*Team contact is responsible for collecting and making all payments\*

No refunds

\$25.00 Surcharge for all returned checks.

We accept Cash, Check, Visa, Mastercard, American Express and Discover.

Payment Type:  Cash  Check# \_\_\_\_\_  Credit Card **\*\*If e-mailing form, please call with credit card information**

Payment Amount: \_\_\_\_\_ Credit Card #: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVC: \_\_\_\_\_

WAIVER: It is agreed that the Ice Vault shall in no way be responsible or liable for any injury of any kind arising out of or in the course of any operation of the Ice Vault. I grant the Ice Vault the right to use all photographs or videos taken of me during any Ice Vault programs for advertising and promotional purposes.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_