



10 Nevins Road  
Wayne, NJ 07470  
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www.icevault.com

# Spring 2021 Youth League

## TEAM APPLICATION

<b><u>MITES</u></b> 2013 & Younger <b>\$2,500</b> 1/2 ice games 15 games/ NO Practices	<b><u>SQUIRTS</u></b> 2011 & 2012 <b>\$3,850</b> 16 games/ NO Practices INCLUDING PLAYOFFS	<b><u>PEEWEEES</u></b> 2009 & 2010 <b>\$4,800</b> 16 games/ NO Practices INCLUDING PLAYOFFS	<b><u>MIDDLE SCHOOL</u></b> (non check) 2007 & Younger <b>\$4,900</b> 16 games/ NO Practices NO PLAYOFFS	<b><u>JV</u></b> 2004 & Younger <b>\$5,300</b> 16 Games/NO PLAYOFFS/NO Practices **All players MUST currently be high school students	<b><u>Varsity</u></b> 2003 & Younger <b>\$5,300</b>
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**Season starts April and ends June 27th**

**Individual Awards for ALL Mites and First Place Trophy for S squirt team!**  
**High School Seniors are allowed to play if they are in the appropriate age group.**

**FULL PAYMENT REQUIRED with application by March 15th to reserve spot-  
No Exceptions. Team Rosters WITH USA HOCKEY REGISTRATION  
INFORMATION due by March 15th**

**Team entries MUST provide own uniforms and coaching staff**  
**Scorekeepers will be provided for Spring House League**  
**COVID RULES for House league on [www.icevault.com](http://www.icevault.com)**

Level:  Mite  Squirt  PeeWee  Middle School  JV  Varsity

Team Name: _____	Contact Person: _____
Jersey Color: _____	Cell Phone: _____
Address: _____	Work Phone: _____
City: _____	E-mail: _____
Zip/Postal Code: _____	
State/Province: _____	

**All players and coaches must be USA Hockey registered for the 2020-2021 Season**  
**Please have all players submit their registration to your organization.**  
**If player is not registered, they may do so online at [www.usahockey.com](http://www.usahockey.com).**

**\*PLEASE NOTE\* Coaches need USA Hockey Coaching Certification**

Payment Information **NO REFUNDS... Refunds only due to NJ State closings**

\$35.00 Surcharge for all returned checks.  
We accept Cash, Visa, MasterCard, American Express and Discover.

Payment Type: <input type="radio"/> Cash <input type="radio"/> Check <input type="radio"/> Credit Card	**if paying by credit card, please input call for number**
Payment Amount: _____	Credit Card Info: _____
Check #: _____	Exp. 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: \_\_\_\_\_