



Travel Roller Hockey Club *2010 Season Information*

The Flyers Skate Zone Youth Travel Hockey Club was created to utilize our many and varied resources to provide players off all levels and ability an opportunity to participate in a quality travel roller hockey organization. The Flyers Skate Zone is proud to be a member of the North American Youth Roller Hockey League.

Player Evaluation/Selection Dates and Times

SATURDAY JAN 23rd: U10 1:30-3:00, U12 3:00-4:30, U14 4:30-6:00, U17 6:00-7:30
SUNDAY JAN 24th: U10 11:00-12:30, U12 12:30-2:00, U14 2:00-3:30, U17 3:30-5:00

Registration is required to attend our tryouts. The **Tryout Fee of \$10** will be collected on the first day of tryouts, for all registrations. Players will be assigned to a team based on their age and ability level. Our staff will endeavor to place players at an ability level that will allow them to compete but be challenged to improve their game. We will strive to not place a player in a situation where he/she is overwhelmed. To ensure that teams are placed at the proper levels, the Skate Zone reserves the right to adjust the teams we field and the levels players (AAA, AA, A) bases on the actual numbers and skill levels of players who attend tryouts.

2010 Game and Practice Slots

U-12, U-14, U-17: Fourteen (14) one hour practice sessions along with Twelve (12) Home game slots and Twelve (12) Away game slots.

***Games consist of two (12) minute stopped time periods.**

2010 Payment Information

Fees & Payment Schedule

All levels: \$300 is due immediately following tryouts. Teams will be selected the night of tryouts and a post tryout meeting for players selected will be held afterwards.

Team Apparel

Jersey's are not included in the fee. There will be an announced fitting day where all new players will order jerseys.

Flyers Skate Zone Selects

2010 Season Contract

Name of Player: _____

Player USA Hockey Member # _____

Street Address: _____

City: _____ State: _____ Zip: _____

Team: _____

I acknowledge that I (we) am/are the parent(s) or legal guardian(s) of the above player, who has been selected to participate in the Flyers Skate Zone Selects for the 2010 season, and agree to pay all fees including league and jersey fees.

I acknowledge that the fee is NON-REFUNDABLE and indicates my and my child's commitment to the Flyers Skate Zone Selects, as well as the rules and regulations of the North American Youth Roller Hockey League (NAYRHL). I also acknowledge and confirm that I am obligated to pay the entire season's fee for my child's participation on the team.

Signature of Parent or Guardian: _____

Name of Father or Guardian: _____

Name of Mother or Guardian: _____

Date: _____

Phone: _____

Email: _____