



**Pine-Richland Inline Hockey Association
Grades 6 through 12
2009-2010 Registration Form**

Player Name	
Street Address	
City, State, Zip	
Date of Birth	
Grade (Sept 2009)	
Home Phone	
Cell Phone (Parent)	
Work Phone (Parent)	
Primary E-mail	
Alternate E-mail	
Parent/Guardian Name	
Parent/Guardian Name	
School- if Elementary	
Years of Experience	
Other Sports you Play	
If Ice Hockey, which Team	

***Note : All players must register with AAU Insurance, via the internet, by Sept. 1, 2009.
All players must turn in their signed Physical Packet forms by Sept. 1, 2009.
All players must turn in their signed Code of Conduct by Sept. 1, 2009.***

Each player will be notified of their placement on a team via the PRIHA website within one week of the conclusion of tryouts.

I understand that the Commitment Fee of \$125.00 is nonrefundable 7 days after Team rosters are posted on the PRIHA website and that all refund requests must be made by written request.

Parent/Guardian Signature _____ Date _____

**Make check payable to PRIHA and mail it along with this form to: PO Box 634, Gibsonia, PA 15044
Or you may bring these items with you to tryouts.**

Official Use Only	
Check # _____	Check Amount _____
Date Received _____	