

Divisions (4 Separate)

8 & Under Division - Born 2008 & Younger

8 - 10 Division - Born 2008, 2007, 2006

10 - 12 Division - Born 2006, 2005, 2004

13 - 15 Division - Born 2003, 2002, 2001

Evaluation Dates and Times

8 & Under Division - Saturday, September 10 8:00 am

8 - 10 Division - Saturday, September 10 9:25 am

10 - 12 Division - Saturday, September 10 10:50 am

13 - 15 Division - Sunday, September 11 8:00 am

Full Equipment Required

Registration Weekend

August 20 & 21

11:00 am- 6:00 pm

Save \$\$ on ALL Superior Programs

Free Public Skate 12:30 pm - 2:30 pm

*** You may register after August 20, 21
but why pay more? ***

★ 46th Season ★ SUPERIOR ICE SKATING RINK

www.superioricerink.com

“Where Are They Now?”

2016-2017 Fall/Winter

SUPERIOR YOUTH HOCKEY LEAGUE

28 Week Program



For Ages 6 - 15 (4 separate divisions)

Only \$695.00 per player

Sign up before

8/20/16 or 8/21/16

Pay Only \$655.00



**Goalies FREE in 8 and Under
and 8-10 Divisions of Rec League**

See our Registration Day Discounts!!

Superior Ice Rink 2016/2017 Youth League

To All Our Prospective Players and Parents:

The 2016/17 Season will mark our 46th year of providing ice hockey for the youth of Long Island. Our USA Hockey Sanctioned program is one of the most highly regarded of it's kind in the country, both for its direction and professionalism, as well as the family atmosphere that surrounds all of the programs here at Superior Ice Rink. We will do our best to provide the following:

- A safe and healthy atmosphere for all.
- An opportunity for all players who wish to play hockey, regardless of skill level.
- A fair and equal opportunity to participate.
- An opportunity to learn the basic skills without an overemphasis on winning.
- Qualified adult leadership.

Here's wishing everyone - parents, players, coaches, and our officials - a great 2016/17 season!

Rich McGuigan
Marc Sambach
Steven Rizer

ALL NEW!

SUPERIOR KNIGHTS

A **MODIFIED TRAVEL PROGRAM** for Rec players only. Look for additional information at the rink. Any questions can be directed to Steve Rizer at SteveR@Superioricerink.com

ALL NEW!

Registration Weekend - August 20 & 21 • 11:00 am- 6:00 pm
Save \$\$ on ALL Superior Programs
Free Public Skate 12:30 pm - 2:30 pm

2016/2017 Fall-Winter Recreational League

ALL NEW!

Ages 8 and Under *Cross Ice Division Program*

Evaluation Session, 18 Games, 6 on Ice Practices,
Unlimited Off Ice Practices on Roller Rink, Playoffs

Season ends approximately March 31st.

- All teams will consist of no more than 12 players and 2 goaltenders.
- All games will be played on Saturday and Sunday mornings and afternoons.
- All games will be (3) 12 minute periods.
- 2 minute running time changes.
- All participants to receive Team jersey and awards.

ALL NEW!

Goalies Free in 8 and Under Division!

Cost per player: \$695.00

*Enroll on or before registration weekend, pay only \$655

Ages 8-10 / 10 -12 / 13-15 Divisions Program (Three Separate Divisions)

Each Season consists of: Evaluation Session, 18 Games, 6 on Ice Practices,
Unlimited Off Ice Practices on Roller Rink, Playoffs
and Skills Competition in 8-10 and 10-12 Divisions

Season ends approximately March 31st.

- Checking permitted 13-15 Division **ONLY**
- Line change on the fly in **ALL DIVISIONS**
- All games will be played on Saturday and Sunday mornings and afternoons.
- All games will be (3) 14 minute periods, OT's and shootouts.
- All teams will consist of no more than 15 players and 2 goaltenders.

Goalies Free in 8 -10 Division Only!

Cost per player: \$695.00

***Team Pricing Available in 10-12 and 13-15 Divisions**

*Enroll on or before registration weekend, pay only \$655

Full Payment required with application

(\$43 additional if not current 2015/2016 USA Hockey Member)

**Your 2015/2016 USA Hockey Membership Expires 8/31/16

• Register online at usahockey.com *

Schedules posted on website: www.superioricerink.com

APPLICATION/REGISTRATION FORM

Send Application To: **Superior Ice Rink**, 270 Indian Head Road, Kings Park, New York 11754 • (631) 269-3900
Must have current USA Hockey card with application. **NO REFUNDS OR MAKE UPS FOR ANY MISSED SESSIONS OR GAMES**

Please check one:

8 and under 8-10 Division 10-12 Division 13-15 Division

Print Name _____ Birth Date _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Print Address _____

City _____ State _____ Zip _____

Position _____ Age _____ Beginner _____ Intermediate _____ Advanced _____

EACH PLAYER MUST BE COVERED BY THEIR OWN MEDICAL INSURANCE AND SIGN USA HOCKEY INSURANCE FORM.

Parent/Guardian Signature _____

Parent/Guardian Print _____

2016/2017 Fall/Winter Superior Youth Hockey League

Did You?

1. Check a division box above? 2. Sign waiver on back? 3. Enclose full payment?

Date _____	For Office Use Only
Amt. Rec. _____	
CK _____ Cash _____	
Credit Card _____	
USA Member _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Mgr. _____	
Sig. _____	

AMATEUR ATHLETIC MINOR WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in Superior Ice Rinks athletics/ sports program, and related events and activities, the undersigned:

1. Agree that the parent(s) or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence but the action, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risk and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue Superior Ice Rink, its affiliated clubs, their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, ad, if applicable, owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releasees", from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.
5. Arbitration: In further consideration of allowing me to participate in the aforementioned activities, I hereby agree to submit to binding arbitration any and all claims which I believe I may have against the facility arising from my activities at the facility. The arbitration shall be pursuant to the rules of the American Arbitration Association. The arbitrators shall apply the Federal Rules of Evidence to all proceedings.

Arbitration shall be commenced within one (1) year from the date on which any alleged claim first arose. Further, the arbitration shall be held in the town where Superior Ice Rink, Inc. is located, unless otherwise mutually agreed to by all the parties. The submission to the American Arbitration Association shall be unlimited and the arbitration award may be enforced by any court of competent jurisdiction.

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Parent or Guardian (Signature/relationship)

Date

Printed name of parent or guardian: _____