



NORTH STAR YOUTH FORUM

www.nsyf.org

NORTH STAR MEN'S LEAGUE 2010 SPRING/SUMMER APPLICATION



SEASON: MAY 3, 2009 THRU AUGUST 19, 2010. NO ICE FROM JULY 5TH, 2010 THRU JULY 8TH, 2010

TEAM NAME _____

GENERAL MANAGER: _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

TELEPHONE (_____) _____ CELL: (_____) _____

E-MAIL (REQUIRED) _____

ALTERNATE CONTACT: _____

TELEPHONE (_____) _____ CELL: (_____) _____

E-MAIL (REQUIRED) _____

DIVISION: (PLEASE CIRCLE) VETERANS SENIOR A SENIOR B SENIOR C

- A \$550.00* NON-REFUNDABLE DEPOSIT MUST ACCOMPANY THIS APPLICATION.
*will be refunded if application is not accepted into league
- ALL APPLICATIONS MUST BE POSTMARKED BY APRIL 10, 2010.
- APPLICATION WILL NOT BE ACCEPTED UNLESS TEAM ROSTER FORM (Page 2) IS COMPLETED!
- ALL PLAYERS MUST BE A USA Hockey REGISTERED PLAYER – COPY OF CURRENT CONFIRMATION REQUIRED (PLAYERS MAY APPLY ON-LINE BEGINNING APRIL 1ST. CURRENT USA HOCKEY # EXPIRES 4/30/10.)
- IT IS THE TEAM MANAGER'S RESPONSIBILITY TO COLLECT USA HOCKEY REGISTRATION FORMS FROM EACH ROSTERED PLAYER AND TURN IN WITH PAYMENT AT FIRST GAME.
- SPRING/SUMMER APPLICATION WILL NOT BE ACCEPTED UNLESS TEAM'S 2009/10 BALANCE HAS BEEN PAID IN FULL
- APPLICATIONS ACCEPTED ON A FIRST COME, FIRST SERVE BASIS

LEAGUE COST: \$2625.00 / 15 GAMES PLUS FINALS FOR TOP TWO TEAMS IN EACH DIVISION

PAYMENT SCHEDULE: *BALANCE DUE ON DAY OF YOUR FIRST GAME.* (CHECKS MAY BE POSTDATED ONE WEEK FROM FIRST SCHEDULED GAME). A \$50.00 LATE FEE WILL BE ASSESSED IF NOT PAID BY FIRST GAME. THIS WILL BE STRICTLY ENFORCED. LOSS OF SKATING PRIVILEGES MAY RESULT IF TEAM IS NOT PAID IN FULL BY JUNE 1, 2010.

_____ CHECK HERE IF DEDUCTING \$200.00 FROM YOUR DEPOSIT FOR 2009-2010 FALL/WINTER LEAGUE PARTICIPANTS.

AMOUNT ENCLOSED: _____ (PLEASE MAKE CHECKS PAYABLE TO NORTH STAR YOUTH FORUM)

CHECK NUMBER: _____ **NAME ON CHECK:** _____

MAIL TO: Northstar Youth Forum, PO BOX 856, NORTHBOROUGH, MA 01532-0856
(QUESTIONS? PLEASE CALL 508-366-1562 x 236 or email JoAnne Bliss – northstarbliss@aol.com)

I have read and understand the payment schedule, and agree to adhere to the guidelines required above. I also take full responsibility to complete and turn in all paperwork required for my team (i.e. team roster, proof of USA Hockey registration for all players). I will make sure each team player is currently registered with USA Hockey for the 2010-2011 season .

PRINT NAME OF GENERAL MANAGER: _____

SIGNATURE: _____ DATE: _____