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**2017-18 CT RoughRiders Player Profile**

**U15’s - $8100**

**Team: U15’s Contacted On:**

**Player: Position: Jersey#: #: #:**

**Parents:**

**Phone Number: email:**

**Payment Information:**

**Deposit: Balance:**

**Credit Card\*: Exp: Code:**

**Cash: Received:**

**Check #: Amount: Date:**

**Check #: Amount: Date:**

**Check #: Amount: Date:**

**Check #: Amount: Date:**

Notes: \*Credit Cards will be charged automatically on said tuition due dates. Standard CC fees apply.

***CT RoughRiders ~ www.CTRoughRiders.com ~ 203.956.0255x106*** [~Marvin@SoNoIceHouse.com](mailto:~Marvin@SoNoIceHouse.com)

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**CT RoughRiders Letter of Commitment**

**I,**

**Hereby accept a position for the following CT RoughRiders Team:**

**Pure 15’s – U15 Team**

**For the 2017-18 Hockey Season**

We, the undersigned player and parents/legal guardians of said player, by executing this Letter of Commitment, agree to the following terms and conditions of commitment.

When accepting a position on the team, you will be required to sign the attached letter of commitment.

1. We have been released by our previous hockey organization and are under no obligation to that organization, financial or otherwise.
2. We agree to remain with the CT RoughRiders for the duration of the 2017-18 season, unless there is a agreement otherwise.
3. We agree to pay a $1500.00 deposit at the 3rd tryout – player not selected will have their checks returned or destroyed.
4. Players selected are willing to pay the remaining balance for the 2017-18 season fees as set forth by the CT RoughRiders, a member of USA Hockey.
5. We agree not to participate with any other member program for the 2017-18 season, unless there is an agreement otherwise.
6. We understand and accept that if the above named player commits to the CT RoughRiders program that he/she must forfeit their deposit and tuition. We also understand and accept that a player who sits out due to refusal to participate remains obligated to satisfy any outstanding financial obligations due to the CT RoughRiders program for the 2017-18 season.
7. We understand and accept that a player who sits out all or a portion of a season is not entitled to any partial or full refund of program fees or expenses.

We, the undersigned player and parents/legal guardians further understand and accept the terms and conditions set forth by the CT RoughRiders, and that this Letter of Commitment may only be terminated by mutual consent between the above named program and player. Upon such mutual consent, and payment outstanding obligations, the player may transfer to another program. Such mutually agreed transfer must occur prior to November 1st, 2017.

**Full Tuition $8100**

***$1500 Deposit Due at 3rd tryout. $2500 due by 5/1 $2500 by 7/1, $1600 by 9/1***

**Player Signature: Date:**

**Parent of Guardian Name (please print):**

**Parent or Guardian Signature: Date:**

***CT RoughRider ~ www.CTRoughRiders.com ~ 203.956.0255x106 ~Marvin@SoNoIceHouse.com***