

Hanover Hockey Association
High School Player Information Form

Since the HHA season begins before high school hockey team tryouts are held, HHA recognizes that some players registered with HHA also plan to try out for their high school hockey teams. HHA registered players who try out and are successful in securing places on their high school varsity or JV team roster may choose to leave the HHA program at that time, or they may continue to play with their HHA team during the high school hockey season if their high school team policy permits. Players must notify the HHA Registrar of their decision in this regard, within one week of high school team selection.

Players who leave HHA when they make their high school varsity or JV team will be eligible for a refund equal to 75% of fees paid if, a) HHA is given written notification of the player's intent to try out for a high school team by the final registration deadline and b) all fees due have been paid in full. Players who do not meet these requirements will not receive a refund. To facilitate the notification requirement, all high school age players will be asked to complete a High School Player Information Form at final registration. Timely completion of this form, indicating the player's intent to try out for a high school team, will satisfy the written notification requirement for the refund.

Players who continue to play for both their HHA and high school teams remain responsible for the full season program fee, no matter what their level of commitment to their HHA team, and are therefore, not eligible for any refund.

Player Name: _____

Gender: M F

Date of Birth: _____

Will this player be in high school for academic year 2008-09?

YES _____

NO _____

(If NO, simply sign and date form and return to HHA by September 6, 2008.)

Which high school will he/she be attending?

Does this player intend to try out for his/her high school hockey team?

(Answering this question satisfies the written notification requirement for refund per HHA High School Player Refund Policy if form is returned to HHA by September 6, 2008.)

YES _____

NO _____

Player Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Name: _____