

2020 Spring Hockey League

Dates:

- League: **April 3rd - June 7th, 2020** (No games: 4/12 or 5/22-5/25)
- *Early Registration Deadline: March 10th, 2020*
- Registration Deadline: **March 29th, 2020**
- AHA! Roster Due: **March 31st, 2020**

Team Fee: \$2,750 (\$1,000 due with registration and the balance due by the 1st game)

1. Early registration and team fee paid in full by **3/10/2020**, will receive a \$100 discount
2. Sign up more than one team from the same club and the club will receive a \$100 discount

Details:

1. 10 games. No Playoffs
2. First 3 games will be used as a tournament seeding weekend; **April 3rd - 5th**
— Mandatory for all teams to be available all 3 days
3. Remaining 7 games will be played between **April 10th - June 7th** (Games will be played on 4/10 & 4/11)
4. All teams must be available to play every day of the week with a minimum of one game a week after the tournament seeding weekend
5. We will look to offer 4 divisions: D1 through D4. D1 being the highest division and D4 being the lowest.
— Please indicate on this form which division you think your team will most likely fit into
— Divisions will be decided on final amount of teams
6. No outgoing seniors or 7th graders allowed!
7. Players rostered on 2 teams within their organization serving suspensions cannot play on either team until the suspension is served with the original team
8. *Schedule Requests - we cannot guarantee your request, but we will try our best.

All USA Hockey, Darien Sportsplex and Darien Park District Rules Apply!

Code#: 720620-A

TEAM REGISTRATION FORM

Team Name: _____ Level (D1, D2, D3, D4): _____

Team Contact: _____

Address: _____ City: _____ Zip: _____

Home Phone #: _____ Cell Phone #: _____

Email Address: _____

*Schedule Requests: _____

Payment Information

Visa, Master Card and Discover Card accepted. Please make checks payable to: Darien Sportsplex

Cash: _____ Check #: _____ CC #: _____ Exp. Date: _____

Cardholder's Name: _____ Authorized Signature: _____

Deposit Paid: \$ _____ Date: _____ Receipt #: _____

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