



# 2012 - 2013 Valley Jr. Warrior Tryout Application

**Register  
Online  
Today!**



**www.JrWarriors.com**

**Membership Leagues:**

www.thenehl.com  
www.hockeynortheast.com  
www.easternjunior.com  
www.empirehockey.com

**Position:**

- Forward
- Defense
- Goal

**Level:**

- Mite Minor       Mite Major       Squirt Minor
- Squirt Major       Peewee Minor       Peewee Major
- Bantam Minor       Bantam Major (Half Season)
- U-16 Tier I & II       U-16 Full Season
- U-18 Tier I       Junior A       Junior B

**Player Information:**

Name: \_\_\_\_\_ This year's team: \_\_\_\_\_ D.O.B: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Parent/Guardian Information:**

Name: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_

I/we understand that accident, health and personal insurance are not provided. I/we verify the above information to be true and give our child permission to participate in the Valley Jr. Warrior Select Program. I/we the parents/guardians of the above named registrant in the Valley Jr. Warrior Program, hereby give permission for the registrant to participate in any and all activities during the 2012-13 season. I/we hereby waive, release, absolve, indemnify and agree to hold blameless the Valley Jr. Warrior, its organizers, sponsors, supervisors, participants and persons transporting my/our registrant to and from activities and any claims arising from an injury to my/our registrant. I/we assume all risks and hazards incidental to such activities and participation. I/we will furnish a birth certificate upon request of the League. I further give permission for the above applicant's name to be posted on the Jr. Warriors website at [www.jrwarriors.com](http://www.jrwarriors.com) if selected for additional tryouts or the team.

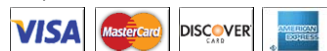
Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please complete this application and . . .**

- Mail application and check made out to: Valley Jr. Warriors  
7 Parkridge Road  
Haverhill, MA 01835
- If paying by credit card, fax application to us at:  
978-557-5519

**Payment Method:**

- Check (enclosed) *Do NOT fax. Must be mailed.*
- Credit Card



**Credit Card Information:**

Card holder Name: \_\_\_\_\_  
Card holder Address: \_\_\_\_\_  
Card holder Telephone: \_\_\_\_\_  
 Card Type:     AMEX     VISA     Master Card     Discover  
Card Number: \_\_\_\_\_ Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Amount: \$ \_\_\_\_\_  
Card holder Signature: \_\_\_\_\_

**Registration Fees (Non-Refundable)**

Mites-Bantams .....	\$70
U-16 Tier I & II .....	\$100
U-16 Full Season .....	\$100
U-18 Tier I .....	\$100
Junior A & B .....	\$120

\* Late Application Fee ..... \$10

**\* Application is considered late if not received ONE WEEK prior to your first tryout date.**

The issuer of this card is authorized to pay the amount shown as TOTAL upon proper presentation. The card holder agrees to pay such total subject to and in accordance with the agreement governing the use of such card. The Valley Jr. Warriors is authorized to accept telephone orders from our business and charge to this card.