



Fall League 2010-2011

Individual Registration / Installment Payments

Thank you for registering to play with Hockey North America for the 2010-11 Fall League season.

We're pleased to offer the flexibility of installment payments to help smooth out the cost of playing hockey.

We're also happy to offer the convenience of automatic payments that involve no interest charges or service fees

This is a general charge authorization form, so to get specific program information you will need to visit our web site for further information.

10-11 Installment Price List

HNA-US Cities Only
Intermediate League

- Baltimore - 3 @ \$175
- Boston - 3 @ \$147
- Chicago - 3 @ \$155
- Cleveland - 3 @ \$130
- Detroit - 3 @ \$142
- Minn/St. Paul - 3 @ \$130
- N. Jersey - 3 @ \$170
- NY / West. - 3 @ \$187
- St. Louis - 3 @ \$137
- Wash DC - 3 @ \$175



For Office Use Only

Sbm/ 1: _____ Dt: _____

PY2: _____ Dt: _____

PY3: _____ Dt: _____

Spread Your Hockey Out in 3 Payments!

This year you can spread your hockey payments out in 3 installments. The first payment will be charged on receipt of this form.

The 2nd payment will be charged to your credit card 30 days later.

The 3rd and final payment will be charged to your credit card 30 days after payment 2.

There are no extra fees associated with this service so long as your payments stay current. Installment payments are not eligible for any discounted fee offers or pro-rates (nor are timely payments subject to any late fees!)

If for some reason your card declines, you will be contacted by our office to arrange for payment. If we do not hear from you after several

attempts to bring your charge information current you will be removed from the installment program and billed whatever the current price offered for league fees.

All Intermediate league payment programs must be complete no later than December 30, 2010.

Please keep a copy of this form.

If you have any questions please contact the HNA League Office at 800-446-2539.

Once this form is fully completed, please return by toll free fax to:

888-HNA-SKOR

(888-462-7567)

Name: _____

Home phone: (____) _____ Work: (____) _____

Email: _____

HNA City (or circle below/left): _____ Winter Team: _____

Credit Card Billing Address Information

Address: _____

City: _____ State: _____ Zip Code: _____

Card No.: _____ Security Code: _____

Expiration: ____/____ (note: the security code is the 3 digit (4 digit on AMEX) number that comes after your card acct no. The number is found on the back of your card (Visa / MC / Discover) and on the front of your AMEX card.

Authorizing Signature

1. After September 1, 2010 There are no refunds
2. All players agree that they have their own medical insurance that covers sports related injuries.

3. By participating in any HNA program the player assumes all risks inherent to the sport of ice hockey and is responsible for being fully outfitted with proper protective equipment.

4. Insurance restrictions require that all participating players wear **at least** a 1/2 shield facial protection. Full facial protection is recommended for all players. All players must wear an HECC or CSA approved hockey helmet.

5. By registering to play in Hockey North America

you agree to observe the rules and policies of Hockey North America as outlined in the Official Rules and Policy guide. A copy is available to any HNA member completely free of charge online at www.hna.com (in the "downloads" section).

6. In the event of default, player is responsible for reasonable collection or attorney's fees under the Laws of the State of Virginia, USA.

Please be sure to read the sections in the policy section concerning team financial obligations in addition to individual obligations. Your payment obligation may not be limited to this registration. Please consult with your team captain.