



Rockets Developmental Program

RSG LEARN TO PLAY HOCKEY

*For Co-Ed Beginner Hockey Players
(Age 12 & under)*

Primary focus will be on enhancing the fundamental hockey skills. This program is offered year-round and players will be divided by age and ability. Rockets Sports Group's elite team of coaches will challenge & encourage players, gaining confidence while having fun. This is an affordable introductory program to play hockey.

Eligibility: No hockey experience is necessary; however, players **MUST** be able to skate forwards, backwards and stop. In the event a skater has difficulty skating, our Learn to Skate (LTS) USA program is strongly recommended prior to signing up.

Each player must register first with USA Hockey prior to signing up.
Here is the link: https://www.usahockeyregistration.com/login_input.action

Full equipment, mouth guard and hockey stick are required. Hockey jersey included.

Our Pro Shop will be happy to assist you with the required hockey equipment.

Please circle Session(s):

SESSIONS (2018-2019):	DATES:	TOTAL:
FALL SESSION (11-weeks): Saturdays (3:40pm-4:40pm)	September 8, 15, 22, 29, 2018; October (no Oct. 6), 13, 20, 27, 2018; November 3, 10, 17, 24, 2018	\$220.00
WINTER SESSION (16-weeks): Saturdays (3:40pm-4:40pm)	December 1, 8, 15, 22, 29, 2018; January 5, 12, (no Jan. 19), 26, 2019; February 2, 9, (no Feb. 16), 23, 2019; March 2, 9, 16, 23, 30, 2019	\$320.00
SPRING SESSION (10-weeks): Saturdays (3:40pm-4:40pm)	April 6, 13, 20, 27, 2019; May 4, 11, 18, (no May 25), 2019; June 2, 9, 16, 2019	\$180.00
BUY ALL 3 SESSIONS... 10% OFF!	Total Amount:	

Participant: _____ Date of Birth: _____ Age: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ Emergency #: _____

E-mail: _____ USA HOCKEY #: _____

(Copy of certification required)

Method of payment: Cash _____ Check (# _____) (Payable to Rockets Sports Group)

Credit Card: VISA M/C AMEX DISCOVERY OTHER

Card Holder's Name: _____ Credit Card Number: _____ Expiration Date: _____
(Please print)

I hereby give my approval for the above-named applicant to participate in the RSG Learn to Play Hockey. I understand that there are many risks inherent in and incidental to participation in the program, and I am willing to participate (or to permit the applicant, if different than the undersigned to participate) in the RSG Learn to Play Hockey. I assume all risks inherent in and incidental to such participation and I hereby release, absolve, indemnify, and hold harmless Rockets Sports Group LLC DBA Bridgewater Sports Arena, it's partners, officers, employees, and staff, of any claim arising out of any injury to myself or to the participant, if different than the undersigned. I hereby authorize and request Rockets Sports Group LLC DBA Bridgewater Sports Arena it's partners, officers, employees, and staff, to act on my behalf or the participants behalf, if different than the undersigned, according to the best judgment of the Rockets Sports Group LLC DBA Bridgewater Sports Arena, it's partners, officers, employees, and staff under prevailing circumstances in the event of any injury, or in the event that I am unable to act for myself or act for the participant, if different from the undersigned. I also understand that from time to time pictures may be taken in which I (or participant) may appear. I authorize Rockets Sports Group LLC DBA Bridgewater Sports Arena to use said pictures in public displays and/or advertising.

RSG LEARN TO PLAY HOCKEY MAINTAINS A NO REFUND POLICY, CANCELLATIONS OR MAKE-UPS. I UNDERSTAND AND AGREE TO ALL OF THE ABOVE.

Parent/Guardian Signature: _____ Date: _____

BRIDGEWATER SPORTS ARENA

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