

**North Carroll Field Hockey** [www.ncfieldhockey.com](http://www.ncfieldhockey.com)

It's time to begin registering for the 2010 Field Hockey season. Registration will be open through July 4<sup>th</sup>. Team sizes will be limited. Waiting lists are possible, so please register early.

**Mark your Calendars**

- **5/15/10** NCFH to e-mail registration forms to previous years players.
- **7/4//10** Registration closed. Applications submitted after these dates are not guaranteed a roster spot. \$20.00 late fee is assessed after 7/4/10.
- **7/17/10** Team fees due to MYFHL
- **8/2/10** Evaluations begin. (mouth guard, field hockey stick, and shin guards required)

Girls will be grouped based upon the grade they will be entering in the fall of 2010. Teams are grouped as follows: 3<sup>rd</sup> & 4<sup>th</sup> grade; 5<sup>th</sup> & 6<sup>th</sup> grade; 7<sup>th</sup> & 8<sup>th</sup> grade. The program offers a clinic for girls in 2<sup>nd</sup> grade and under. Practice days and times will be chosen depending on the number of teams we have in each age group. Typically, teams practice either Monday & Wednesday or Tuesday & Thursday. Games usually take place on Sundays and begin the first weekend after Labor Day.

If you have any questions or need further information, please contact Kelly Gary, program coordinator at [kgary2@aol.com](mailto:kgary2@aol.com) or 410-239-7885.

# NORTH CARROLL FIELD HOCKEY

A program of the North Carroll Recreation Council

## Registration form – Fall 2010

**Mail registration form & payment (checks payable to NCRC Field Hockey) to:  
NCRC Field Hockey  
5127 Hoffmanville Rd. Millers, MD 21102**

PLEASE PRINT

1) Name: \_\_\_\_\_ DOB \_\_\_\_\_ Entering Grade \_\_\_\_\_  
2) Name: \_\_\_\_\_ DOB \_\_\_\_\_ Entering Grade \_\_\_\_\_  
3) Name: \_\_\_\_\_ DOB \_\_\_\_\_ Entering Grade \_\_\_\_\_

Street Address: \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Health concerns (if any): \_\_\_\_\_

Help is needed - please volunteer:

Team Parent \_\_\_\_\_ Field Maintenance \_\_\_\_\_ Head Coach \_\_\_\_\_ Asst Coach \_\_\_\_\_

League sponsorship \_\_\_\_\_

### Registration Fees:

**NCRC Member: \$95**

**Non- NCRC Member: \$100**

**In-house Clinic Fees:** (grade 2 or younger not playing on the 3-4 travel team)

**NCRC Member: \$50**

**Non- NCRC Member: \$55**

Membership # \_\_\_\_\_ required to take discount

**\*\*\*THERE WILL BE A \$20 LATE REGISTRATION FEE FOR ANY REGISTRATIONS  
RECEIVED AFTER JULY 4, 2010\*\*\*** NO REFUNDS AFTER SEPT 4, 2010

**For Program Only: Registration Fee Paid \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check# \_\_\_\_\_**

I/We the parents and/or guardians of the above named candidate for a position on a team, hereby give approval to participate in any and all league activities. I/We assume all risk and hazards incidental to such participation, including transportation to and from the activities; and I/We do hereby waive, release, absolve indemnity, and agree to hold harmless the local league, North Carroll Girl's Field Hockey, North Carroll Recreation Council, the chartering organization, the organizers, sponsors, participants, and persons transporting my/our child to and from activities; for any claim arising out of an injury to my/our child whether the result of negligence or for any other cause. I/We agree to return upon request, the uniform and other equipment loaned to my child in as good a condition as when issued except for normal wear.

Any activity involving motion or physical orientation involves a personal risk of injury, overexertion, or stress. The undersigned acknowledges that the North Carroll Recreation Council, and North Carroll Girl's Field Hockey, do not provide any registrant medical or hospitalization insurance whatsoever, and hereby waive any and all claims against the North Carroll Recreation Council, North Carroll Girl's Field Hockey, and the Carroll County Dept of Enterprise and Recreation Services, or any other person affiliated with the North Carroll Recreation Council program for injuries sustained while watching, playing games, traveling to/from games, or participation in any leisure activity.

Accessibility Notice: The American with Disabilities Act applies to the Carroll County Government and its programs, services, activities and facilities. If you have any questions, suggestions or complaints, please contact Jolene Sullivan, the Carroll County Government with Disabilities Coordinator, at 410-848-9707, 410-876-5253 and TT# 410-848-5355. The mailing address is 225 North Center St, Westminster, MD 21157.

**Signature of Parent or Guardian:** \_\_\_\_\_