ALASKA ALL STARS HOCKEY ASSOCIATION 2017/18 SEASON 8U MITE EVALUATIONS

No Charge for Evaluations!

Please bring this form with a copy of your USA Hockey Registration Confirmation to Evaluations It is free for 2011 birth years and younger www.usahockeyregistration.com



8U MITE RED (2009/2010)	
8U MITE WHITE (2009/2010/2011)	
8U MITE BLUE (2010/2011/2012/2013)	

8U Mite Red Evaluations (combined with Mite White)	Wednesday, August 16, 2017	7:00 - 8:00 pm @ BB1
(Birth year 2009/2010)	Thursday, August 17, 2017	7:00 – 8:00 pm @ BB1
8U Mite White Evaluations (combined with Mite Red)	Wednesday, August 16, 2017	7:00 - 8:00 pm @ BB1
(Mostly 2010, 2011- Some 2009 and 2012 Birth Years)	Thursday, August 17, 2017	7:00 – 8:00 pm @ BB1
8U/6U Mite Blue Evaluations	Tuesday, August 22, 2017	6:00 - 7:00 pm @ BB2
(Mostly 2011 and 2012 birth years, Some 2010 and 2013)	Thursday, August 24, 2017	6:00 - 7:00 pm @ BB2

2017-18 USA Hockey Membership #_____

Player Name:		Birth Date:	
Player School:Grade 20 Player's Previous Season's Team:			
Position: F D G Shoots: L or R Parent (1):			
Email:		Cell Phone:	
Address:		Home Phone:	
City:		Zip:	
Parent (2):			
Email:		Cell Phone:	
Address:		Home Phone:	
City:	State:	Zip:	
Consent to Treat: I,, parent/gua	rdian of the above lis	sted player give my consent to the coache	

I, ______, parent/guardian of the above listed player give my consent to the coaches and representatives of the Alaska All Stars Hockey Association permission to obtain medical treatment for any injuries that may arise from participation in any AASHA event from any licensed physician, hospital, or medical clinic. I will not hold the coaches or representatives of the Alaska All Stars Hockey Association liable for any injuries that could arise from participation in an AASHA sponsored event. Participants understand the inherent risks in ice hockey and other member activities.

Signed:_____

Date:_____