

Team Application Form (2009-10)

Hockey Association			
Age Classification (Circle one) (Mite) (Squirt) (PeeWee) (Bantam) (Midget16) (Midget18)		Level of Play (Circle one) (A2) (A1) (A) (AA)	
Team Name		Relative Strength (est.) <u>within</u> Level of Play (Circle one) (High) (Medium) (Low)	
	Head Coach	Assistant Coach	Manager/Scheduler
Name: Address: City:	_____ _____	_____ _____	_____ _____
Phone:	Home - _____ Work - _____ Cell - _____	Home - _____ Work - _____ Cell - _____	Home - _____ Work - _____ Cell - _____
E-mail:			
<p><small>* Level of Play classification will be determined by the Pre-season tournament. Teams will initially be placed where the team applies combined with the estimated team strength and any other factors considered significant. A petitioning process will be used for teams that feel they've been inappropriately placed. All applications should include a roster with birth dates.</small></p> <p><small>By signing this application form, the team contact person, on behalf of his/her team, releases the sponsors, organizers, officials, and volunteers of the Buckeye Travel Hockey League (BTHL) from any liability, injury or accident which may be incurred by any player, team official or spectator while participating in or traveling to or from League games and/or other League sponsored events.</small></p> <p><small>Teams further agree to comply with all BTHL Rules and Regulations including the participation in an end-of-season tournament.</small></p>			
Signed:			Date:

Team Fee (On time): TBD-(Mite)
\$780-(Squirt-Bantam) \$855-(Midgets)

Late Fee: Add \$50 penalty per team

*To be considered "on time" an application must be **POSTMARKED** by Aug 14, 2008*

*We will accept "late" applications up until Aug 21, 2008. Please note this deadline is not a "postmark" deadline, it **MUST BE RECEIVED AND IN OUR HANDS** by this date.*

The fee includes everything: Pre-season tourn, Reg-season registration and Post-season tourn.

*Make checks payable to **Buckeye Travel Hockey League***

Please return this and Roster to:

BTHL Team Application
 c/o John Doyle
 6439 Kincaid Road
 Cincinnati, OH 45213

IMPORTANT:
For Association's mailing one check; please complete a form for each team.

Phone: 513-631-6243 email: jtdoyle@cinci.rr.com

*For additional information concerning teams and levels of play, contact **Doug Burgdorf @ dburgdorf@cinci.rr.com***