



Adult Hockey League Payment Plan (Summer '19)

CONTACT INFORMATION

PLAYER NAME: _____ DOB: _____
FIRST MI LAST MM DD YYYY

PHONE: _____ EMAIL: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

By providing email addresses above, you are agreeing to receive email communications from Jacksonville Ice & Sportsplex. You may unsubscribe at any time by clicking the link at the bottom of any email address or by sending a written request to laura@jacksonvilleice.com.

TEAM INFO

FIRST TEAM NAME: _____ SUB
DIVISION: A B C BEVIE 35A 35C 50+
DISCOUNT: MILITARY/1st RESPONDER - 10% CAPTAIN - 10% GOALIE - 50%

SECOND TEAM NAME: _____ SUB
DIVISION: A B C BEVIE 35A 35C 50+
DISCOUNT: 2ND TEAM DISCOUNT - 25% GOALIE - 50%

Note: Discounts will be applied at processing. Jacksonville Ice does not combine discounts.

PAYMENT OPTIONS

PAY IN FULL: EARLY - \$325 REGULAR - \$375 LATE - \$425 SUB - \$150

PAYMENT PLAN: 4 EQUAL PAYMENTS OF...
 EARLY - \$85 REGULAR - \$95 LATE - \$110

_____ I hereby authorize Jacksonville Ice & Sportsplex to charge the credit card listed on the Credit Card Authorization Form in my name for the amount and date as outlined in the Option Selected above. I understand that in the event of any charges being declined, the enrollment will be suspended until payment is cleared.

Prices include sales tax. Payments due: at registration, 6/1/19, 7/1/19, and 8/1/19

Valid Credit Card must be on file for all payment plans. A \$25.00 late fee will be assessed if any past due payments are not brought current by the 5th of the current month.

Signature Printed Name Date

I-95 & Emerson | 904-399-3223 | jacksonvilleice.com

FOR OFFICE USE ONLY RECEIVED BY: _____ DATE: ____/____/____