



# Fall 2019 Elite Training Registration Form

## CONTACT INFORMATION

PLAYER NAME: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
FIRST MI LAST MM DD YYYY

USA Hockey Number: \_\_\_\_\_  EMAILED TO HOCKEY@JACKSONVILLEICE.COM

DAY SELECTION (CHECK ALL THAT APPLY):  MONDAY  WEDNESDAY

MOTHER/GUARDIAN'S NAME: \_\_\_\_\_  ACCOUNT HOLDER

PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

FATHER/GUARDIAN'S NAME: \_\_\_\_\_  ACCOUNT HOLDER

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](mailto:laura@jacksonvilleice.com). Your information will only be shared with USA Hockey and the Tampa Bay Lightning Made Hockey Programs.

## DISCOUNTS (APPLIED AT PROCESSING)

MILITARY/1<sup>st</sup> RESPONDER - 10%  SIBLING - 10%  GOALIE - 25%

\*Note: JIS does not combine Discounts.\*

## PAYMENT OPTIONS

PAY IN FULL:  ONE DAY TRAINING (\$350.00)  TWO DAY TRAINING (\$650.00)

PAYMENT PLAN:  ONE DAY TRAINING (\$75.00 at registration, then 4 payments of \$75.00)  
 TWO DAY TRAINING (\$135.00 at registration, then 4 payments of \$135.00)

\_\_\_\_\_ 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. In the event of a decline, a late fee could apply. I understand that I am committing to the amount of the full season by signing this form. A cancellation fee will be applied to all enrollments terminated prematurely.

Prices include sales tax. Payments due: at registration, 9/1/19, 10/1/19, 11/1/19 and 12/1/19

\_\_\_\_\_  
Signature Printed Name Date

\*Admin Use Only\* Received: \_\_\_\_\_ Date: \_\_\_\_\_ Processed: \_\_\_\_\_ Date: \_\_\_\_\_\*