



PARENT/GUARDIAN WAIVER

I agree to make payments or obtain fundraising/sponsorship credits and maintain the monthly payments set by CCHC, with the entire fee to be paid in full no later than 30 days prior to the last regular season game. I agree to participate in the club's various activities (in addition to fundraising), volunteering to work gate/admissions, penalty box duties and to attend parent meetings throughout the year. I acknowledge that in the event of suspension, injury (to be determined by the Executive Board of Directors), failure to sustain a grade level (2.0 or higher), or any other reason, I agree to be held responsible for the full season payment.

I further acknowledge that all monies once paid are non-refundable. Parents will be responsible at the end of each school marking period to let the Carrick Club Registrar know if your child has maintained a GPA of 2.0 which is required by the Carrick Cougar Hockey Association and PIHL to play. If a player does not have or maintain a 2.0 or is on academic suspension, they will be placed on Hockey Suspension until they can show their grades have improved and their school administration approves.

Parent/Guardian: _____

Date: _____

Executive Board Member Signature: _____

Date: _____