



BLOOMFIELD HILLS HIGH SCHOOL

FALL HOCKEY CLINIC 2017

SEASON PAYMENT SCHEDULE AGREEMENT

FALL SKATES WILL BE EVERY TUESDAY 4:30-6 PM &  
EVERY SUNDAY 5:30 – 7PM BEGINNING SEPT. 5<sup>TH</sup> – OCT. 29<sup>TH</sup> AT ORCHARD  
LAKE ST. MARY'S ICE ARENA

## **PLAYER COST AND PAYMENT /POLICIES:**

### **Section 1. Costs and Equipment Requirements.**

- 1) STANDARD SEASON PROGRAM COST: Cost includes, but not limited to, all ice time for player practices, and skills coaching, hockey.
- 2) EQUIPMENT REQUIREMENTS: (HELMETS & SKATES FOR FIRST PRACTICE MANDATORY) All players are responsible for obtaining their own equipment by Sunday, Sept. 9<sup>th</sup>. Equipment requirements are as follows: helmet, knee pads, elbow pads, hockey gloves, hockey pants, chest protector, neck guard, mouth guard, cup, hockey skates and hockey stick. (If you have any questions regarding equipment purchases please contact Coach Mick at [micks.hockey@gmail.com](mailto:micks.hockey@gmail.com))
- 3) Players who are currently participating in other Fall Sports programs are still encouraged to come out and play. Please contact Coach Mick with you availability and alternative options will be made.

### **Section 2. Payment Schedule/Options.**

- 1) TRYOUT COST have been include in this year's Standard Program Cost.
- 2) PAID IN FULL: \$400
- 3) NORMAL PAYMENT INSTALLMENT SCHEDULE:

**Initial Payment - \$200 due Tuesday, Sept. 5, 2017**

**Final Payment - \$200 due by Thursday, October 5, 2017**

- 4) Checks should be made payable to "Bloomfield Hills Schools", payments should be submitted to Brenda Koch she will be available at most games or you can mail your payment to Brenda Koch at 3823 Quarton , Bloomfield Hills, MI 48302.

### **Section 3. Delinquent and Declined Payment.**

- 1) In the event a check has been returned, the issuer will be notified and informed that they have seven (7) days to make restitution, including any related fees to prevent further collection activity.
- 2) Players will not be allowed to skate if payments are delinquent by seven (7) calendar days.
- 3) Perspective Players will not be allowed to skate during tryouts if payment is delinquent from any past High School Season including the Fall Program.

I/We the undersigned agrees to pay all cost in full accordance with our selected payment plan and in accordance with the terms set forth in this agreement. I/We the undersigned understands and agrees that player sanctions for violating the Bloomfield Hills Schools Athletic Code of Conduct is not grounds for terminating Parent(s)/ Guardian(s) agreement to pay all cost in full accordance with their selected payment plan.

#### Parent/Guardian 1

Parent/ Guardian Name: \_\_\_\_\_

Parent/ Guardian Signature: \_\_\_\_\_

Date:

#### Parent/Guardian 1

Parent/ Guardian Name: \_\_\_\_\_

Parent/ Guardian Signature: \_\_\_\_\_

Date:

Team Acknowledgement: \_\_\_\_\_ Date: \_\_\_\_\_

Booster Club Treasurer or Other Officer