

LAMPETER-STRASBURG RECREATION COMMISSION

ADULT ROLLER HOCKEY LEAGUE

SPRING 2009

“A” LEAGUE= “DESIGNED FOR AVERAGE TO ADVANCED PLAYERS”

“B” LEAGUE= “DESIGNED FOR BEGINNER TO AVERAGE PLAYERS”

ALL GAMES WILL TRY TO BE PLAYED ON SUNDAYS!!!

**ROSTER DEADLINE: FRIDAY, MARCH 6th @ 4PM;
\$225.00/TEAM (INCLUDES \$25.00 REFUNDABLE FORFEIT FEE)**

**LATE ROSTER DEADLINE: FRIDAY, MARCH 13th @ 4PM;
\$260.00/TEAM (INCLUDES \$25 REFUNDABLE FORFEIT FEE)**

***EACH TEAM IS RESPONSIBLE FOR \$15 IN CASH PER GAME (including playoffs) FOR ONE OF THE REFEREES!!**

STARTING DATE: SUNDAY, MARCH 22nd

**CAPTAINS MEETING: TUESDAY, MARCH 17th 6:00PM AT THE LSRC OFFICE
ALL CAPTAINS(OR TEAM REPRESENTATIVE) MUST ATTEND!!!**

ROSTER MAXIMUM: 13 PLAYERS

AGES: 16 AND OVER

LENGTH OF GAMES: 3 – 12 MINUTE PERIODS (STOPPED CLOCK)

EACH TEAM WILL RECEIVE LEAGUE RULES AND REGULATIONS. WE ASK THAT EACH PLAYER OBEY THE RULES FOR THE SAFETY OF YOURSELF AS WELL AS OTHERS. IF YOU WOULD LIKE A COPY OF THE RULES BEFORE THE MEETING CALL THE LSRC AT 464-5110.

LSRC

852 VILLAGE ROAD

PO BOX 425

LAMPETER, PA 17537

464-5110

464-5112, FAX

EMAIL: STAFF@LSREC.ORG

**LSRC
ADULT ROLLER HOCKEY LEAGUE ROSTER**

TEAM NAME: _____

TEAM CAPTAIN: _____

COLOR: _____

LEAGUE PREFERENCE: (CIRCLE) A LEAGUE OR B LEAGUE

CAPTAIN: _____ EMAIL: _____

ADDRESS: _____

PHONE: _____ AGE: (IF UNDER 18) _____

ASSISTANT CAPTAIN: _____ EMAIL: _____

ADDRESS: _____

PHONE: _____ AGE: (IF UNDER 18) _____

PLEASE FILL OUT COMPLETE ROSTER WITH NAMES.

ALL PLAYERS MUST SIGN THE LIABILITY RELEASE ON THE ROSTER BEFORE THEIR FIRST GAME. THEY CAN SIGN THE ROSTER THE DAY OF THE GAME.

IF UNDER 18 YEARS OF AGE PARENTS MUST SIGN ROSTER OR HAVE ATTACHED SIGNATURE!!

NAME	AGE (IF UNDER 18)	SIGNATURE
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1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

13. _____