

EDGE ICE ARENA ADULT HOCKEY LEAGUE – FREE AGENT FORM

C-1 MON					ion Submitted _	Date Application
Address City		D.O.B				Name
City			First		Last	Address
Position:ForwardDefenseGoalie Requested Division: Check 1 or 2		Zip Code				
Requested Division: Check 1 or 2 Division Day of F C-1 MON C-2 WED D-1 TUE D-2 SUN D-3 SUN Over 40 Draft League THU Season Information: 20-Game Winter Season plus double elimination playoffs (season begins in mid-September). 10-Game Summer Season plus single elimination playoffs (season begins in mid-May). Edge Adult Hockey League is non-checking. USA Hockey Sanctioned League.		_Cell		(Wk)		Phone: (H) _
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Years of Experience: lce Inline			ne	lce Inli	xperience:	Years of E
Important Notes:						

- This is a request for placement only.
- Completion of this form does not guarantee a roster spot.
- No money is to be accepted with the submittal of this form.
- Players that are placed with a team must register with the league and USA Hockey prior to playing their first game.

Please Return Application by email: ashowers@fhprd.org

or by mail to:

Edge Ice Arena Attn: Hockey Director 6623 South Ward Street Littleton, CO 80127

> **Pleae contact Hockey Director** Phone: 303-409-2211 • Fax: 303-409-2240 www.ifoothills.org