

MADISON CAPITOLS AAA
WINTER SEASON, 2025-2026
TIER 1, AAA 10U
(2015 BIRTH YEAR'S & LOWER)

START DATE, FIRST PRACTICE:
THE WEEK OF SEPTEMBER 1ST, 2025.

END DATE:
SUNDAY, MARCH 1ST, 2026.

DETAILS OF 2025-2026 AAA WINTER SEASON –

- TEAM WILL HAVE MINIMUM OF 24 OFF-ICE TRAINING SESSIONS WITH OUR CLUB'S STRENGTH COACH, IN THE GYM LOCATED AT BOB SUTER'S CAPITOL ICE ARENA ON THE SECOND FLOOR. WORKOUTS WILL START THE WEEK OF MONDAY, SEPTEMBER 15TH, 2025 & END THE WEEK OF FEBRUARY 2ND, 2026.
- ACCESS TO HUDL VIDEO BREAKDOWN SYSTEM.
- TEAM WILL PLAY AT LEAST 50 GAMES, 5 EVENTS.
- TEAM WILL HAVE AT LEAST OF 65 HOURS OF ON-ICE PRACTICE TIME.
- TEAM WILL HAVE AT LEAST 4 POWER SKATING FOCUSED ON-ICE SESSIONS WITH OUR CLUB POWER SKATING INSTRUCTOR.
- TEAM WILL HAVE AT LEAST 4 ON-ICE SKILL SESSIONS WITH OUR CLUB SKILLS COACH & OTHER COACHES ON STAFF.
- GOALIES WILL HAVE NINE, 1 HOUR GOALIE SPECIFIC TRAINING SESSIONS THROUGHOUT THE COURSE OF THE SEASON, TWO EACH MONTH, IN ADDITION TO THEIR NORMAL PRACTICES.

IMPORTANT NOTE: This price DOES NOT include a mandatory team slush fund payment that all families are required to make, which pays for your team's, head coach's flights, gas, hotels, etc. Those payments will be made directly to your teams designated person; the club will not collect any payments for team slush funds.

HEAD COACH:
TOM GILBERT

TOMGILBERT@MADCAPSHOCKEY.COM

PLAYER FEE COST:
\$6,395.00

PAYMENT SCHEDULE:
Required Deposit - \$1,500.00.

- July 1st - \$1,225.00
- August 1st - \$1,225.00
- September 1st - \$1,220.00
- October 1st - \$1,220.00

APPAREL INCLUDED:

- MCAAA, ATHLETIC SHORTS.
- MCAAA, ATHLETIC T-SHIRT.
- MCAAA, ATHLETIC JOGGERS.
- MCAAA, SWEATSHIRT.
- MCAAA, PULLOVER.
- WINTER HAT
- MCAAA, BASEBALL CAP.
- MCAAA, HEAVY WINTER JACKET.

EQUIPMENT INCLUDED:

- (1) HOME GAME JERSEY & SOCKS.
- (1) VISITORS GAME JERSEY & SOCKS.
- (1) PRACTICE JERSEY.
- CUSTOM LOGO, PLAYER EQUIPMENT BAG.
- (1) PAIR OF CUSTOM HOCKEY GLOVES.
- (1) PAIR OF CUSTOM BREEZERS.



2025-26 SEASON TIER I PLAYER AGREEMENT



Programs are permitted to sign returning players starting immediately after the completion of their 2024-25 playing season, the signing of any out of program player may not be completed until 48 hours after the completion of all Tier 1 Nationals **April 6th, 2025**.

Player Information (Print or Type)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ USA Hockey Age Classification: _____

Last Season's Team and Organization: _____

Birth Date: (MM/DD/YYYY) ____/____/____ USAH #: _____

IMPORTANT NOTE TO PLAYERS

You and your parents/guardians should be aware that the signing of this form **immediately** and **permanently** binds you to **this** Team for the **entire upcoming season** and you **may not play or practice with any other team. Doing so will result in an automatic 5 game suspension** except for:

High School, Junior, Junior College, College, or University teams

If you are relying on any representations not included on this form, those representations should be placed in writing and added to the reverse side or attached to this form.

Player's Signature: _____ Date: ____/____/2025

I have read **and understand** this Tier I Player Card, the WAHA Rules regarding Tier I Hockey and the WAHA By-Laws. **In addition, I have received and agree to the financial obligations of this Team for the upcoming season as identified in the Organization Fact Sheet.**

Signature of Parent (Guardian): _____ Date: ____/____/2025

CERTIFICATE OF TEAM REPRESENTATIVE

I hereby certify that as the authorized Team Representative I accept this player for the season and have explained to the player and his/her parents (guardian) all of their financial obligations and the fact that this form **immediately** and **permanently** binds him/her to this Team for the **entire 2025-26 season**.

Team Representative (printed): _____

Team Representative Position: _____ Team Name: _____

Team Representative Signature: _____ Date: ____/____/2025