

HOLLYDELL ICE ARENA



MARCH 22
TO
JUNE 7

DEFENSEMEN SKILLS CLINIC

with Mike Gooch

*SHOOTING * STICK HANDLING * GAME SITUATIONS*
* CHECKING * BACKWARD SKATING * PLAYMAKING *

10 - ONE HOUR SESSIONS FOR \$250.00

AGES 8, 9, 10

TUESDAY 6:00-7:00 PM

*****NO CLASS ON APRIL 12 FOR TO HURRICANES TRYOUTS*****

(NO REFUNDS - NO REFUNDS - NO REFUNDS)

FULL ICE HOCKEY EQUIPMENT REQUIRED

PROGRAM IS SUBJECT TO CANCELLATION IF FEWER THAN 15 STUDENTS REGISTER

REGISTRATION FORM FOR "SPRING 2016" DEFENSE 8-10

STUDENTS NAME _____ DATE OF BIRTH _____
STUDENTS AGE _____ PARENTS NAME _____
ADDRESS _____ CITY _____
STATE _____ ZIP CODE _____ DAY PHONE _____
NIGHT PHONE _____ POSITION _____

ASSUMPTION OF RISK AGREEMENT AND RELEASE

Upon entering events sponsored by Hollydell Ice Arena and / or its Agents or Affiliates, I/WE agree to abide by the rules of Hollydell Ice Arena as currently published. I/WE understand and appreciate that participation or observation of the sports constitutes a risk to me/us of serious injury ,including permanent paralysis or death. I/WE voluntarily and knowingly recognize, accept, and assume this risk and release Hollydell Ice Arena,its affiliates, their sponsors, event organizers and officials from any liability therefore.

DATE _____ SIGNATURE _____
RELATIONSHIP TO PARTICIPANT _____

PRE REGISTRATION AND PAYMENT IS REQUIRED