



THURSDAYS

The 5 Basic Skills in Hockey...

Learn Them ... Work Them... Perfect Them

INNOVATIVE TRAINING TECHNIQUES ARE USED TO INCORPORATE THE 5 SKILLS OF HOCKEY INTO YOUR GAME.

SKILLS ARE WORKED ON INDIVIDUALLY IN AN ON-ICE ROTATING STATION FORMAT & THEN CORRELATED INTO FULL UTILIZATION OF THE ICE & GAME PLAY CONCEPTS

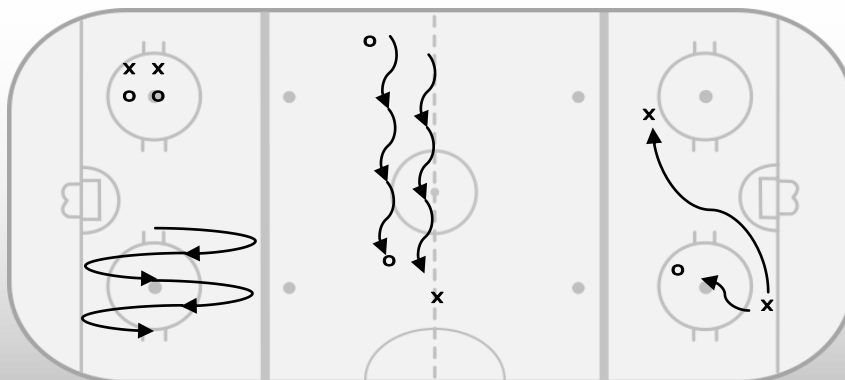


THURSDAYS at 6:10 - 7:10PM

Starting September 2011 for the Fall/Winter Season

Clinic Sessions will feature rotating stations

PLAYERS
GROUPED
BY ABILITY



LEAD INSTRUCTOR
JUSTIN NELSON

\$20 WALK-IN OR \$175 - 10 SESSION PUNCH CARD

\$20 Walk-In per session - pay directly at front desk in Glacier lobby before each session.

Purchase a 10 Session Punch Card for \$175. Pick up your Punch Card at the Glacier Front Desk

Players sign in at front desk before EACH session - have Punch Card dated or pay drop-in fee

You May Register Online for the 10 Session Punch Card (cost \$175) www.glacierskateshop.com

Mite thru Midget Levels

Online Registration: www.glacierskateshop.com

For More Information - Sanderson@glacierskate.com





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Registration

NAME: _____
Player Name Date of Birth (REQUIRED)

ADDRESS: _____
Street City / State Zip

PARENT INFO: _____
Name(s) Home # Cell #

E-MAIL ADDRESS: _____

MM/SM MITE SQUIRT PEE WEE BANTAM MIDGET

\$175 Punch Card for 10 Sessions - Punch Card Available at Glacier Front Desk

\$20 Walk-In - Session Date(s): _____

Payment Included:

Check # : _____ Payable to Glacier Ice Arena MC/Visa/Disc#: _____ exp: _____

Name on Card: _____

Release and Hold Harmless Agreement

Please read this form carefully and be aware in registering yourself or your minor child/ward for participation in the above program/programs, you will be waiving and releasing all claims for injuries you or your minor child might sustain arising out of the above program/programs

I recognize and acknowledge that there are certain risks of physical injury to participants in the above program and I agree to assume the full and entire risk of any injuries, damages or loss, regardless of severity, which I or my minor child/ward may sustain as a result of participating in any or all activities connected or associated with such program/programs.

I agree to waive and relinquish all claims I or my minor child/ward may have as a result of participating in the program against the Glacier Ice Arena, Glacier Hockey, HockeyZone, and Glacier Ventures and any of the officers, agents, member, servants and/or employees of the mentioned entities.

I further agree to indemnify and hold harmless and defend The Glacier Ice Arena, Glacier Hockey, HockeyZone, and Glacier Ventures and any of the officers, agents, members, servants and/or employees of the mentioned entities from any and all civil claims resulting from injuries, damages or losses sustained by me or my minor child/ward arising out of, connected with, or in any way associated with the activities of the program/programs.

In the event of any emergency, I authorize the Glacier Ice Arena officials to secure from any licensed hospital, physician and/or medical personnel and any treatment deemed necessary for me or my minor child/ward's immediate care and agree that I will be responsible for payment of all medical services rendered.

I have read and fully understand the above Program Details, Waiver and Release of All Claims and Permission to Secure Treatment.

Print name of Participant

Signature of Participant or Parent/Guardian

Date