



Kent Youth Ice Hockey Advanced Spring Camp



WHAT: Spring Ice Hockey Camp
WHO: Mite and Squirts
 Pee wee and Bantam
WHERE: Kent State Ice Arena

TIMES AND DATES

Mite and Squirt

Date	Day	Time
April 11	Saturday	3:15 – 4:15
April 16	Thursday	5:00 – 6:00
April 18	Saturday	3:15 – 4:15
April 23	Thursday	5:00 – 6:00

Pee wee and Bantam

Date	Day	Time
April 11	Saturday	4:15 – 5:15
April 16	Thursday	6:00 – 7:00
April 18	Saturday	4:15 – 5:15
April 23	Thursday	6:00 – 7:00

MAXIMUM ENROLLMENT: 30 for each division

Register at: Kent Parks and Recreation Office
 497 Middlebury Rd (In Fred Fuller Park)
 Kent, Ohio 44240 (330) 673-8897

Equipment needed to participate: Full Ice Hockey Equipment required
 This Advanced Ice Hockey Camp is coached by Roosevelt's High School Coach, Ben Barlow and Assistant Coaches. The camp is designed to improve current Ice Hockey player's skill development accompanied by intense skating. Not recommended for beginner skaters.

REGISTRATION DEADLINE: APRIL 10

Cost: \$40.00 for Residents \$48.00 for Non-Residents

Ice Hockey Spring Camp

Name _____ School _____

Address _____ Age _____ Grade _____

Home Phone _____ Parent's Work Phone _____

Please check one box: Male _____ Female: _____

Yrs of Ice Hockey Playing Experience: _____

Refund Policy:

Prior to the first game: A letter of explanation submitted to the Director, full refund will be granted

After the first game: No refund will be granted unless a health related situation then you will be refunded less any direct uniform cost if it occurs prior to the beginning of the 2nd half of the season.

PARENTAL CONSENT, WAIVER OF LIABILITY & PHOTO RELEASE

Waiver – I intending to be legally bound, do hereby for myself, my heirs and assignees, waive any and all claims to damages I may have against Kent City Schools, Kent Parks and Recreation Dept. KSU Ice Arena or any agent or representative of the afore mentioned and give my permission for _____ to participate in the Kent Youth Ice Hockey Spring Camp. Photographs and videos are periodically taken of participants during programs. Please be aware that these photographs may be used for Parks & Recreation publication and/or local newspapers.

Print Parents Name _____ Signature of Parent _____ Date: _____

For Office Use Only Receipt No. _____ Initials _____ Amount Paid _____