

2022 WINTER HOCKEY CLINICS  
SPONSORED BY JUNIOR MARAUDER HOCKEY



This winter, Junior Marauder Hockey will again offer several affordable programs with professional instructors for boys and girls aged 6-18. Each program is a separate offering, and players must separately register and pay for the specific program (or programs) in which they wish to participate.

**TOM FORD SKILLS CLINIC (10 WEEKS beginning December 4, 2021) Choose Saturday OR Sunday):** Dynamic Skating's Tom Ford will be leading the players through drills designed to work on various skills of the game. Emphasis will be placed on edge control, lengthening the stride, proper skating mechanics, puck control, stick handling, puck protection, and explosive movements with the puck. We will have sessions on Saturday mornings or Sunday evenings.

**Saturday sessions** will be held at the Holland Arena in Woburn at either 7:50am or 9:00am. (12/4; 12/11; 12/18; 1/8; 1/15; 1/22; 1/29; 2/5; 2/12; 2/19) (No sessions on 12/25 or 1/1)

**Sunday sessions** will be held at the **Belmont Hill School Rink** (350 Prospect Street) at 6:40pm or 7:40pm. (12/5; 12/12; 12/19; 1/9; 1/16; 1/23; 1/30; 2/6; 2/13; 2/20) (No sessions on 12/26 or 1/2)

Players may sign up for either the Saturday **or** Sunday Session and should attend the session for which they are registered. Players may register and pay for both days. Once sign-ups are complete, we will group players according to the day chosen and then by age and ability. We anticipate having groups of Mites, Squirts and Pee Wees (6-12 years old), and Bantam Midgets and High School (13-18 years old).

**Cost for 10-week Saturday or Sunday (Choose one) Skills sessions: \$250**

**TOM FORD SUNDAY 3 V 3 CLINIC (10 WEEKS Beginning December 5, 2021)** (12/5; 12/12; 12/19; 1/9; 1/16; 1/23; 1/30; 2/6; 2/13; 2/20) (No sessions on 12/26 or 1/2): We will run a 3-on-3 hockey program on Sunday evenings at the Belmont Hill Rink at 6:40pm or 7:40pm. Players will be matched with and against players of equal size and talent and will play a variety of cross ice games that will allow kids to have fun while improving their overall skills in stick handling; decision making; creativity; quick skating; conditioning; and scoring.

**Cost of 10-week Sunday 3 v 3 sessions: \$250 per player**

**PAYMENT INFORMATION:**

PAYMENT FOR ANY AND ALL PROGRAMS MUST BE MADE **IN FULL** PRIOR TO PARTICPATION. If any program is cancelled due to the coronavirus, we will issue a pro-rated refund.

Checks should be made out to “Junior Marauder Hockey.”

Space in all programs is limited to ensure proper coach to player ratio.

Please complete the attached RELEASE AND REGISTRATION and return it along with a check **before December 10th** to the following address:

Junior Marauder Hockey  
c/o Shannon Noone  
3 Brighton Street  
Belmont, MA 02478

PLAYER’S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

SESSIONS ENROLLING IN: (Please circle and check all that apply):

**Saturday (@ Holland Arena) On Ice Skills with Tom Ford; Cost: \$250** \_\_\_\_\_

**Sunday (@ Belmont Hill School) On Ice Skills with Tom Ford; Cost: \$250** \_\_\_\_\_

**Sunday 3 v 3 (@ Belmont Hill); Cost: \$250** \_\_\_\_\_

**TOTAL COST** \$ \_\_\_\_\_

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PARTICIPANT RELEASE

**PARTICIPANT NAME:** \_\_\_\_\_

PARENT'S EMAIL: \_\_\_\_\_

2<sup>nd</sup> EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: HOME-\_\_\_\_\_ CELL-\_\_\_\_\_

EMERGENCY PHONE NUMBER (if different than above): \_\_\_\_\_

HOCKEY TEAM/LEVEL PLACEMENT DURING 2020-2021 SEASON (e.g., Mite A, Squirt C, etc.):  
\_\_\_\_\_

USA HOCKEY #: \_\_\_\_\_

CHECKS SHOULD BE MADE OUT TO **JUNIOR MARAUDER HOCKEY** AND MAILED WITH THIS RELEASE TO: JUNIOR MARAUDER HOCKEY, C/O SHANNON NOONE, 3 BRIGHTON STREET, BELMONT, MA 02478.

**AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY**

READ BEFORE SIGNING

In consideration of being allowed to participate in Junior Marauder Hockey athletic sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risks of injury and illness (ex: communicable diseases such as MRSA, influenza, and COVID-19) from the activities involved in this program are significant, potentially life-threatening, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I have not to the best of my knowledge had **ANY** close contact nor have cared for someone who has been diagnosed with Covid-19, and have experienced no cold or flu symptoms in the last 14 days – regardless of severity, these symptoms include but are not limited to: fever, chills, shaking with chills, muscle pain (unrelated to physical exertion), headache, loss of taste or smell, cough sore throat, respiratory illness, shortness of breath nor difficulty breathing, and
5. I know there are risks of exposure to directly or indirectly arising out of, contributed to, by, or resulting from:

- An outbreak of any communicable disease, including but not limited to, the virus “severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)”, which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof;
6. In consideration of participating as either a team member or competitor at location, and in acknowledging that I know and willing to assume the risks associated with this activity, I voluntarily agree to waive, hold harmless and indemnify Belmont Youth Hockey Association (BYHA), Junior Marauder Hockey, Dynamic Skating, Tom Ford and their trustees, agents, volunteers and employees from any claims, demands, damages and causes of action of any nature whatsoever arising out of ordinary negligence which I, my heirs, my assigns or successors may have against them for, on account of, or by reason of my participation in the above activities. I indicate my agreement to this hold harmless elective noted below.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Participant Name: \_\_\_\_\_

Participant Signature: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_

**FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)**

This clinic has been organized to provide supervised hockey instruction for children ages 4 to 18. I/we, the parents of the above-named candidate, do give my/our approval for my/our child to participate in any and all clinic activities. I/we do assume all the risks and hazards incidental to the conduct of the activities, transportation to and from the activities, and I/we do hereby release, absolve, indemnify and hold harmless Junior Marauder Hockey, Dynamic Skating, Tom Ford, Belmont Youth Hockey Association (BYHA), and Dynamic Skating and Belmont Youth Hockey’s organizers, sponsors, officers, directors, coaches and supervisors, any or all of them and any and all volunteers. If injury occurs to my/our child, I/we waive all claims against Dynamic Skating, Tom Ford and/or BYHA’s organizers, sponsors, officers, directors, coaches or the supervisors appointed by them and any and all volunteers. I/we likewise release from responsibility any person transporting my/our child to or from the activities.

This is to certify that I, as parent/guardian with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of the activity and his/her responsibilities for adhering to the rules and regulations. My child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees from any liabilities incident to my minor child’s/ward’s involvement or participation in these activities, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I/we understand that if I/we want our child insured for any injury in connection with clinic activities, I/we must provide our own insurance coverage. All liability is disclaimed.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_