

# 2018 Intro to Hockey Summer

Our camp is designed for boys and girls ages 5 to 12. It's a great introduction into ice hockey in a fun and supportive environment. No ice skating experience necessary. This beginner hockey program separates the ice into three zones, each one according to the child's skill level. The children learn to play in small groups through games and activities.

**Zone 1** - Emphasis on feeling comfortable on the ice while gaining balance and control.

**Zone 2** - For skaters who have completed Zone 1 or who have skating experience. This level will focus on stick handling and working with the puck.

**Zone 3** - For skaters who have completed Zone 2. In this level children will learn how to shoot and play mini games.

**Our day will include** - Two on ice sessions depending on the package you choose, on ice and off ice games, Indoor and Outdoor sports (relay games, broomball, t-ball, volleyball, four square, kickball & soccer).

**Lunch & Snack**—Is available for an extra \$60. (Burgers, Hot Dogs, Sandwiches, fruit, yogurt, pastas, pizza, juices and milk).



***\*equipment is provided\****

## **CAMP DATES:**

July 9th - July 13th 8:45am to 3:00pm

July 30th - August 3rd 8:45am to 3:00pm

## **DAILY SCHEDULE:**

8:45 - Drop Off

9:00 - 9:45 Activities

9:45 - 10:00 Snack

10:15 - 11:30 On Ice

11:45 - 1/2 Day End

12:00 - Lunch

12:30 - 1:00 Activities

1:15 - 2:30 On Ice

2:45 - 3:00 Pick Up

## **CAMP COST:**

**Full Day** - \$400 **Half Day** - \$250 AM ONLY (8:45 - 11:45)

**Early drop off** - (7:45am) \$50

**Aftercare Program** - (3-5:00 pm) \$100 Includes Snack & Activities

# 2018 Intro To Hockey Camp at ProSkate

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

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: M / F Email: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Name & Number: \_\_\_\_\_

Allergies: \_\_\_\_\_

## **\*\* WAIVER OF LIABILITY MUST BE SIGNED TO PROCESS REGISTRATION\*\***

In consideration of the participant being permitted to register and participate in the ProSkate Skating classes in conjunction with ProSkate, we do hereby release and discharge it's directors, agents, employees and any person or corporation or partnership connected herewith from all manner of action, injury, damages, costs, claims or demands which we will, shall or may hereinafter have, suffer or receive by reason of such participation in any program at the rink. This release shall be binding on our heirs, assigns, executors and administrators. It is further agreed that ProSkate shall not be considered to guarantee or warrant such equipment as may be used in the conditioning of said programs. In the event of cancellation, all monies are non-refundable. There are no exceptions. All applications require parent/guardian signature. I have read and fully understand the waiver of liability requirement!

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Choose Your Week: July 9th \_\_\_\_\_ July 30st \_\_\_\_\_ Full Day \$400 \_\_\_\_\_ Half Day \$250 \_\_\_\_\_

Full Day Lunch & Snack: \$60 \_\_\_\_\_ Half Day Snack: \$20 \_\_\_\_\_ (Lunch Can Not Be Purchased Daily)

Early Drop Off: \$50 \_\_\_\_\_ Aftercare: (3:00-4) \$50 \_\_\_\_\_ (3:00-5) \$100 \_\_\_\_\_ (Aftercare Late Fee \$10)

**\*PROSKATE IS NOT RESPONSIBLE FOR ANY CHILD LEFT IN THE BUILDING AFTER CHECKOUT, IF NOT ENROLLED IN THE AFTERCARE PROGRAM.\***

METHOD OF PAYMENT (Circle one): cash check Visa/MC AMEX Discover  
Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Signature: \_\_\_\_\_

\*Please make checks payable to ProSkate

**PROSKATES CREDIT/REFUND POLICY - NO CASH REFUNDS!** If a participant is unable to complete a class due to injury & has written proof from a doctor, an in-house credit will be given for the unused portion of the session. The in-house credit may be used for any program at ProSkate. **There are NO make ups or credits for missed classes.** Any participant dropping out of a program at ProSkate, not due to injury (as stated above), will still be responsible for paying the entire session fee.

**PROSKATE \* 1000 CORNWALL ROAD \* MONMOUTH JUNCTION, NJ 08852**

**PH: (732) 940-6400 \* FAX: (732) 940-6404 \* www.proskatenj.com**