

Please note: This is NOT a "Learn to Skate" program. It is highly recommended that your child has had skating lessons.

FOR AGES  
**3-7**

**LOTS OF FUN!**



**FALL/WINTER/SPRING 2018-19**

- ★ 50-minute sessions focused on:
  - BALANCE • EDGES / TIGHT TURNS • STOPPING
  - PUCK CONTROL / PASSING / SHOOTING
  - FORWARDS AND BACKWARDS SKATING
- ★ Players split into stations for drills. These classes end in mini-games (groups based on skill)
- ★ Head Instructor: Tyler Flemming
- ★ Cool Little Cougars jersey included

1 PARENT/GUARDIAN PER CHILD ALLOWED TO ASSIST ON THE ICE (HELMETS MANDATORY).

Includes membership into the Al's Source for Sports SUPER SPORT PROGRAM



Choose your preferred day, and Session(s).

**SATURDAYS 11am at Wave Twin Rinks**

**Session 1** Sept 8/15/22/29, Oct 6/13/20/27, Nov 3/10/24, Dec 1/8/15/22  
15 weeks

**Session 2** Jan 5/19/26, Feb 2/9/16/23, Mar 2/9/16/23/\*30, Apr 6/13/20  
15 weeks

\*March 30 class is at Wave Sports Centre at 11:30am  
NO CLASSES ON NOV 17, DEC 29, and JAN 12

OR

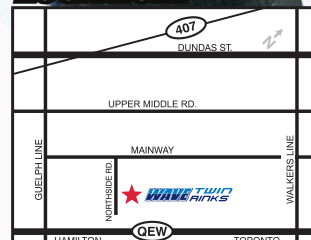
**SUNDAYS 10:30am at Wave Twin Rinks**

**Session 1** Sept 9/16/23/30, Oct 7/14/21/28, Nov 4/11/25, Dec 2/9/16/23  
15 weeks

**Session 2** Jan 6/20/27, Feb 3/10/17/24, Mar 3/10/17/24/31, Apr 7/14/21  
15 weeks

NO CLASSES ON NOV 18, DEC 30 and JAN 13

**LOCATION:**



1179 NORTHSIDE RD, BURLINGTON, ON L7M 1H5

PLAYERS GRADUATE FROM THIS PROGRAM INTO OUR ORIGINAL SIX PREMIUM DEVELOPMENT HOUSE LEAGUE!

**PRICING**

Per Session: **\$284<sup>.96</sup>** +tax

Whole Season: **\$524<sup>.78</sup>** +tax



Registration available online at

**WWW.WAVEHOCKEY.CA**

or at Wave Twin Rinks.

Contact us @ 905-336-3434 ext. 10  
or programs@wavehockey.net

# **WAVE HOCKEY** REGISTRATION FORM (Please print)

Once completed, please fax to 905-336-9311 or drop off at Wave Twin Rinks (1179 Northside Rd, Burlington, ON L7M 1H5)

## **LITTLE COUGARS BACKYARD HOCKEY - FALL/WINTER/SPRING 2018-19**

Participant's Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

Participant's Date of Birth (yyyy/mm/dd): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Sex:  Male  Female

E-mail: \_\_\_\_\_

How did you hear about this program?: \_\_\_\_\_

### Level of Ice Hockey this year:

- Do not play
- House League Beginner
- House League Intermediate
- House League Advanced

### \*\*\* Skating Ability: \*\*\*

- Beginner
- Intermediate
- Advanced

Other \_\_\_\_\_

Request to play with: \_\_\_\_\_

Are you interested in sponsoring a team?:  Yes  No

**Full hockey equipment and stick are required.**

### Which Day/Session(s) are you registering for?:

**SATURDAYS**  Session 1 Sept 8/15/22/29, Oct 6/13/20/27, Nov 3/10/24, Dec 1/8/15/22 15 weeks  
11am - 12pm  
Wave Twin Rinks  
Pricing (Includes jersey): **\$322.00 All-in**

**NO CLASSES**  Session 2 Jan 5/19/26, Feb 2/9/16/23, Mar 2/9/16/23/\*30, Apr 6/13/20 15 weeks  
**NOV 17, DEC 29, JAN 12** Pricing (Includes jersey): **\$322.00 All-in** \*March 30 class is at Wave Sports Centre at 11:30am

Full Saturday Season Sept 8 - Apr 20 **\$593.00 All-in** 30 weeks

**SUNDAYS**  Session 1 Sept 9/16/23/30, Oct 7/14/21/28, Nov 4/11/25, Dec 2/9/16/23 15 weeks  
10:30am - 11:30am  
Wave Twin Rinks  
Pricing (Includes jersey): **\$322.00 All-in**

**NO CLASSES**  Session 2 Jan 6/20/27, Feb 3/10/17/24, Mar 3/10/17/24/31, Apr 7/14/21 15 weeks  
**NOV 18, DEC 30, JAN 13** Pricing (Includes jersey): **\$322.00 All-in**

Full Sunday Season Sept 9 - Apr 21 **\$593.00 All-in** 30 weeks

Payment Options:  Cash  Cheque (Payable to Conacher Athletics Club)  Visa  MasterCard

Credit Card #: \_\_\_\_\_ Expiry: \_\_\_\_\_ / \_\_\_\_\_

REGISTRATION CANCELLATIONS ARE SUBJECT TO A \$25 SERVICE CHARGE.

THE UNDERSIGNED IS RESPONSIBLE FOR THE CONDUCT OF THE PLAYER WHILE PARTICIPATING IN THIS PROGRAM. THE PLAYER SHALL BE GOVERNED BY THE RULES ESTABLISHED BY WAVE HOCKEY INC. MISSED CLASSES WILL NOT BE REIMBURSED. IT IS UNDERSTOOD THAT THE UNDERSIGNED PERSON OF LEGAL AGE OR LEGAL GUARDIAN SHALL NOT HOLD THE LEAGUE OR THEIR INSTRUCTORS, ADMINISTRATORS, OFFICIALS, OR THE FACILITY USED LIABLE IN THE EVENT OF INJURY OR LOSS IN ANY MANNER WHATSOEVER. I SPECIFICALLY WAIVE, GIVE UP AND RELEASE WAVE HOCKEY INC., ITS RELATED COMPANIES AND THEIR STAFF FROM ALL LIABILITY FOR ANY CLAIM FOR DAMAGES WHICH I MAY HAVE RELATING TO INJURIES OR ILLNESS THAT MY CHILD MAY SUSTAIN. BY SIGNING THIS WAIVER, I ALSO CERTIFY THAT MY CHILD IS IN GOOD HEALTH, WITH NO CHRONIC ILLNESS OR ABNORMAL TENDENCIES. THE PLAYER LISTED ABOVE IS REGISTERED UNDER THE CARE OF THE UNDERSIGNED AND ASSUMES ALL RISKS THROUGH ENROLLMENT IN THIS PROGRAM WHICH CONSISTS OF PHYSICAL INTERACTION CAPABLE OF INJURY. THE PLAYER MUST WEAR ALL APPROVED HOCKEY EQUIPMENT INCLUDING HELMET, FULL FACE MASK, SHIN PADS, ELBOW PADS, HOCKEY GLOVES, HOCKEY PANTS, SHOULDER PADS, MOUTH GUARDS AND HOCKEY SHIRT. I HAVE READ AND UNDERSTAND ALL ITEMS ON THIS PLAYER FORM. I UNDERSTAND THAT I AM PERMITTING WAVE HOCKEY INC. TO USE MY EMAIL ADDRESS FOR COMPANY-RELATED COMMUNICATIONS. I THE UNDERSIGNED AGREE TO ALLOW WAVE HOCKEY INC AND/OR ITS RELATED COMPANIES TO USE THE PARTICIPANTS' NAMES AND OR PICTURES FOR ADVERTISING PURPOSES.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_