

# MARCH BREAK

# Hockey CAMPS

**OPEN TO PLAYERS OF ALL LEVELS, BOYS & GIRLS**

## March 11-15, 2019

**TIME:** 9am - 4pm daily  
(8am drop off, Pick up at 4 to 5pm)

**\*BONUS** - No extra cost for drop off and pick up times

PLAYERS WILL BE GROUPED BASED ON AGE & SKILL

**Choose from 2 options:**

### 1) FULL DAY HOCKEY CAMP

★ 2 on-ice sessions including:  
Skills & Drills, and Power Skating

★ 1 session of Dry-land training,  
with



**OR A FULL DAY CAMP INCLUDING:**

### 2) HALF DAY HOCKEY CAMP, AND HALF DAY BURLOAK MULTI-SPORTS

★ 1 on-ice session including:  
Skills & Drills, and Power Skating

★ 1 Multi-Sport session of sports &  
activities at Burloak Sports Centre



Bring running shoes, water bottle and t-shirt. Transportation will be provided to Burloak Sports Centre

★ Lunch Plan  
\$45+tax for 5 days

## FOR AGES 5-8 & 9-12



SANCTIONED BY:



**LOCATION:**



## PRICING

# \$299

+tax  
Per Player

FREE extended care with 8am drop off & 4-5pm pick up!



Registration available online at

## WWW.WAVEHOCKEY.CA

or at StoneRidge Ice Centre.

Contact us @ 905-336-3434 ext. 10  
or TylerR@jrcougarshockey.ca

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

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

## **MARCH BREAK HOCKEY CAMPS 2019**

Which camp option are you registering for?:  1) Full Day Hockey Camp  2) Half Day Hockey Camp and Half Day Burloak Multi-Sports

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

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

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

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

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

Emergency Contact: \_\_\_\_\_ Emergency Contact Number: \_\_\_\_\_

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

Medical Conditions / Allergies / Questions?: \_\_\_\_\_

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

What is the name of your current team?: \_\_\_\_\_

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

### Level of Ice Hockey this year:

- |  |                                  |   |
|--|----------------------------------|---|
| <input type="checkbox"/> Do not play               | <input type="checkbox"/> Rep A   | <input type="checkbox"/> Girls House League |
| <input type="checkbox"/> House League Beginner     | <input type="checkbox"/> Rep AA  | <input type="checkbox"/> Girls Rep          |
| <input type="checkbox"/> House League Intermediate | <input type="checkbox"/> Rep AAA | <input type="checkbox"/> Other _____        |
| <input type="checkbox"/> House League Advanced     | <input type="checkbox"/> Select  |   |

All-in Pricing: 5 Days: **\$337.87**      2 Days: **\$169.50**  
4 Days: **\$293.80**      1 Day: **\$84.75**  
3 Days: **\$237.30**

Select the days you'll be attending:  Monday March 11     Tuesday March 12     Wednesday March 13     Thursday March 14     Friday March 15

★ Would you like to sign up for the Lunch Plan?:  Yes (Add \$10.17 per day - All-in price)     No

### NOTES FOR PARENTS:

Please supply your child with shorts, running shoes & a water bottle. Please send two snacks and drinks with your child (morning & afternoon). Please note that all schedules are subject to change (Thank you).

**ALL CREDIT CARD TRANSACTIONS WILL INCUR A 3.2% PROCESSING FEE ABOVE PRICE AND TAX.**

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

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

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 PROGRAM 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: \_\_\_\_\_