

Family and Medical Information:

Is there a family situation or custody concern of which we need to be aware?

NO YES
(Please attach explanation if yes.)

Does your child have any special needs, services, restrictions, allergies, and/or medications about which we need to be aware:

NO YES

(If yes, please list/describe below. Attach additional sheets if necessary.)

If medicine is to be administered by staff during Camp, please fill out and attach an *Authorization of Medication for Child* form. We will not administer medicine without this form. Self-medication is not permitted.

Do you want your child to wear a life jacket while swimming?

YES NO

Are you interested in KidsPlex Summer Camps or KidsPlex After School Program?

YES NO

Lunch:

Campers need to have ready-to-eat lunches (no refrigeration or microwave available), or may purchase lunch from our SnackPlex menu. (Information available at front desk.)

Lunches from the SnackPlex must be prepaid. No refunds will be given for unused SnackPlex accounts.

Friday Lunch / Pizza Party: Pizza will be provided for all campers on Friday. If camper is not interested in Pizza, please provide sack lunch.

Cancellation Policy: Cancellations must be made in writing one week prior to scheduled date of attendance. Any notification received less than one week is not eligible for refund. In the case of extreme situations, a monetary refund may be chosen, however \$100.00 administration fee will be deducted from the refund.



Camp Offerings

HHC is committed to not only teaching and training hockey players, but having fun. Developing friendships, camaraderie, team building and having fun are some of the goals of this camp. This is not a Learn to Skate Camp; all participants must have completed a minimum of one Learn to Play Hockey Session. This camp will feature the following curriculum:

- In Stride Power Skating
- Power Positioning (Defense and Offense)
- Shoot to Score (Shooting Drills and Form)
- Top Shelf Attack (Attacking Zone, Tips and Tricks for more scoring)
- Hammer Time Checking (Pee-Wee and Up)
- Goaltending x2

Each camper will receive a free jersey and t-shirt. At the completion of the camp, each camper will also receive a HHC Certificate of Completion.



Triangle SportsPlex

One Dan Kidd Drive
Hillsborough, NC 27278

Phone: 919-644-0339
Fax: 919-644-2120
www.trianglesportsplex.com



Hammer's Hockey Camp Summer 2010 *Triangle SportsPlex* July 5-9



Ages 7-15 All Levels



919-644-0339 ext. 243





Hammer's Hockey Camp

Mark Hamlett (Hammer)

Director of Ice and Hockey Operations
for the Triangle SportsPlex



17 Years of Pro Officiating
Experience NHL,AHL,ECHL

Over 1,300 games worked
professionally, including
playoffs and finals

Officiated 1997-98 ECHL
All Star Game.

Playing experience of 31 years.



Typical Daily schedule- What you'll need For Camp-



Drop Off: 8:00am
Pick Up: 5:00pm

8:00am	Drop Off, Welcome, Locker Room, Morning Warm up and Stretching
9:00am	On-Ice
10:45am	Street Hockey / Shooting Clinic Wednesday Water Train
11:20am	Lunch
12:40pm	Locker Room
1:00pm	On-Ice
2:45pm	M,W,F Swim T,TH Dry Land Fitness
4:00pm	Out door Training/Games

Full Ice Hockey Equipment is required:

Hockey Helmet, Hockey Gloves, Hockey Pads and Pants, On-Ice Hockey Stick, Off-Ice Hockey Stick

Swim suit, Towel, Shower flip flops

Campers are required to wear sneakers during off ice events (No Sandals or Flip Flops).

HHC Registration

- Payment Attached
 Call for credit/debit card info \$375.00

Child's Name: _____ DOB: _____

Position: _____ Jersey Size: _____ Gender: M F

Age: _____ Hockey Experience (Years): _____

Upcoming Division (Mite, Squirt, Pee Wee, Bantam): _____

Please fill out information on back of form.

Name Relationship

Address

Home Phone Work Phone

Email Address

Emergency Contact and Phone Number

Waiver and Parent Signature: Please read the following waiver, then sign and date at the bottom.

We cannot accept any registration forms that do not have a parent/guardian signature and date.

In consideration of the above named registrant being granted permission by Recreation Factory Partners, LLC dba: Triangle SportsPlex to participate in this program and associated activities, I hereby accept and assume all risks said and release and hold harmless Recreation Factory Partners, LLC dba: Triangle SportsPlex and its officers, employees, agents and volunteers from any and all liability relating to or arising out of the above named person's participation. I authorize Recreation Factory Partners, LLC dba: Triangle SportsPlex and its officers, employees, agents and volunteers at any such person's discretion, to administer emergency first-aid treatment at my expense, to obtain the services of a physician and/or rescue squad and to authorize the same to affect such treatment of the above named person as the same deem advisable. Recreation Factory Partners, LLC dba: Triangle SportsPlex reserves the right to dismiss any child from the program if their behavior is disruptive to the other participants or the child is uncooperative.

_____/_____/2010 Parent/Guardian Signature