BEST PERFORMANCE SPORTS TRAINING Skating Skills Camp - 2019

- These sessions will place athletes in a high coach to player ratio. **THE BEST PERFORMANCE SPORTS TRAINING TEAM** will guide <u>14</u> players per group through intense athlete centered instruction. Each group will have focused sessions that concentrate on skating fundamentals, advanced skating techniques and game performance skating. Our unique instruction allows athletes to develop excellent technique, explosive acceleration and dynamic agility allowing them to do everything at full speed, creating a more dominant **hockey** player. Athletes will develop incredible balance and will learn to gain speed instead of losing it when changing direction.
- Goalie sessions will be 60-minute sessions focusing on skating and recovery techniques used by goaltenders. These skating techniques will help goalies develop balance and speed while moving around the net.

Division and Birth Year
Initiation – 2014, 2013 Birth year
Novice – 2012 Birth year
Novice – 2011 Birth year
Atom – 2010 Birth year
Atom – 2009 Birth Year
Peewee – 2007 & 2008 Birth Year
Bantam/Midget – 2002 to 2006 Birth Year
Goalie Session 2012 to 2002 Birth Year

All Sessions will be held at the Pomeroy Sports Centre

How Much?

Players and Goalies

All sessions (5 ice sessions) \$180 GST included

All players that attended our 2018 Day Camp or Peewee and Bantam Camp receive a \$40 discount All players that attended our 2018 Spring Break 3 on 3 Camp receive a \$20 discount

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How Do I Register?

- 1. Registration will be first come first serve. There are only 14 spots available per ice slot. This will ensure a high coach to athlete ratio.
- 2. Go to Ernie's Sports Experts in Fort St. John and pick up a registration form.
- 3. Complete the form and give it to the front desk personnel with payment enclosed.
- 4. Include an email address on the registration form so registration can be confirmed on August 18th
- 5. If you have any questions email Phil Hiscock at <u>bestperformancephil@gmail.com</u> or call/text 250-261-0887.

IMPORTANT!! Please indicate which group you would like (This may change based on registration numbers)

Amount Enclosed	Cash	Cheque#	Etransfer
Guardian Name:		Phone Number: _	
Email(please print clearly) Primary: _			
Seconda	ary:		
Player Name:		DOB (<i>mm/dd/yy</i>):	Age:

- Please make cheques payable to "Phil Hiscock"

^{*}Discounts cannot be combined \$40 is the max discount

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the Best Performance Sports Training Summer Camps athletic/sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does 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, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Best Performance Sports Training, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

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.

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PARTICIPANT'S SIGNATURE	
XWITNESS	Date Signed:
FOR PARTICI	PANTS OF MINORITY AGE
(UNDER AGE 18	AT TIME OF REGISTRATION)
agree to his/her release as provided above of a	with legal responsibility for this participant, do consent and all the Releasees, and, for myself, my heirs, assigns, and next Releasees from any and all liabilities incident to my minor rograms as provided above.
X	
PARENT/GUARDIAN'S SIGNATURE	E EMERGENCY PHONE NUMBER
Y	

WITNESS