



COUNTY ICE CENTER

5201 S. Murray Park Lane
Murray, UT 84107
Countyice.slco.org



2017 Spring Skills Clinic

At The County Ice Center

Mites/Squirts

Fridays 5:45-7:15 PM

OR Saturday 4:15-5:45

Pee Wee/Bantam

Mondays 7:15-8:45 PM

OR Saturday 6:00-7:30 PM

Cost = \$99.00 (Six 1.5 Hour sessions)

Each group limited to 30 skater and 4 goalies

Classes Start March 24, 25 and 27

Registration Begins February 27th at 9:00am

Register in person at the County Ice Center or online at youthhockey.slco.org

The spring skills clinic is an opportunity to learn from players and instructors who have played and skated at high levels and will provide the highest level of quality instruction.

Professional power skating coach **Brenda Buckwalter**, will teach the power skating segments of the clinic. Head instructor for the Pee Wee/Bantam hockey skill sessions is former NHL player **Kevan Guy**. The head instructor for the Mite/Squirt hockey skill sessions is **Tyler Murphy** (former University of Utah player and current coach of the Utah Jr Grizzlies Pee-wee travel team). Assistant coaches will include **Sam Littleton** (EHL JR Nationals, U18 AA Golden Eagles), **Peter Williams** (U18 AA JR Ducks) and other County Ice Center staff.

Goalie training from Josh Anderson and Toph Hunt (U18 AA Davis County Eagles)

For more information, contact:

Alan Canfield

385.468.1655

acanfield@slco.org



Spring Clinic 2017

Salt Lake County Youth Hockey March 24 - May 13

CHOOSE **ONE GROUP ONLY** (You can register your child for either the division they played in this season or the division they will play in next season)

- Group 1 Mites and Squirts Fridays 5:45 - 7:15 pm (3/24,31; 4/7,28; 5/5,12) **NO CLASS 4/14 or 21**
- Group 2 Pee Wees and Bantams Mondays 7:15 - 8:45 pm (3/27; 4/3,10,24; 5/1,8) **NO CLASS 4/17**
- Group 3 Mites and Squirts Saturdays 4:15 - 5:45 pm (3/25; 4/1,8,29; 5/6,13) **NO CLASS 4/15 or 22**
- Group 4 Pee Wees and Bantams Saturdays 6:00 - 7:30 pm (3/25; 4/1,8,29; 5/6,13) **NO CLASS 4/15 or 22**

REGISTRATION FORM

Name _____ Age _____ DOB _____ Group _____

I am registering as a (check one): _____ Skater _____ Goalie

Address _____ City _____ Zip _____

Parent/Legal Guardian _____ Email: _____

Home Phone _____ Work Phone _____ Cell Phone _____

In Case of Emergency, Notify (other than Parent or Guardian)

Name _____ Phone # _____ Relationship _____

Parental/ Participant Statement of Agreement Assumption of Risk, Liability Release, Indemnification and Refund Policy

1. **Release & Indemnification:** I hereby, recognize and acknowledge my child's participation in recreational activities may involve bodily injury and/or emotional injury to myself and/or my child. In consideration of my child being able to participate in such events, I, for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly indemnify and hold harmless, defend, release, waive, and discharge Salt Lake County, and its officers, employees and volunteers from any and all suits, claims or liability, including negligence, based on any injury except that caused solely by the willful misconduct of Salt Lake County, that may result from my child's participation in Salt Lake County Parks & Recreation activities. In addition, I agree that I or my insurance company will pay for medical, hospitalization or any other expenses resulting from my child's participation.
2. **Refund Policy:** As per Salt Lake County policy and procedures, the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. All refunds must be requested in person and accompanied with a written refund request. No refunds shall be given after the first day of the program.
3. **Collections:** I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred to the Salt Lake County Attorney's Office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake County Attorney for collection.
4. **Emergency Treatment:** I hereby authorize Salt Lake County Parks & Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise there from. I understand that I or my insurance company will pay for such emergency treatment.
5. **Equal Opportunity:** Salt Lake County Parks & Recreation provides equal opportunity to participate regardless of race, creed, or gender, and will, upon request, provide reasonable accommodations to individuals with disabilities.
6. **Media Consent:** I hereby grant permission to Salt Lake County (SL County) to use my or my children's Photograph, Videotaped Image, Quotes/Comments, Name for publicity and educational purposes in any and all publications and media without limit or reservation.

By signing this assumption of risk, liability release, indemnification and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosures, and that I agree to its terms.

Signature (Parent or Legal Guardian) _____ Date _____

Office use only: AMT. PAID _____ CASH _____ CHECK # _____ CC _____ INT. _____