

LEARN TO PLAY—FUN!!

HOCKEY DEVELOPMENT PROGRAM

2017-2018 Season

Instructional Youth Hockey Program
for Beginning Level Players, Ages 5-14

Level 1 (8 weeks—once a week)

Starts Monday, Sept. 18 and ends Nov. 20



(Mondays: 5:30 pm 9/25; 10/2, 9, 16, 23, 30; 11/6, 13)

(Saturdays: 10:30am 9/23, 30; 10/7, 14, 28; 11/4, 11, 18) (No class 10/21-UEA wk)

(Sundays: 12:00 pm 9/24; 10/1, 8, 15, 29; 11/5, 12, 19) (No class 10/22-UEA wk)

The **LEARN TO PLAY** Instructional Hockey Program consists of **four** 8 week Semesters over the course of a year. Following Level 1, subsequent Semesters build on the skills presented in the previous Semester. It is a structured program designed to provide beginners with basic skating and hockey skills. This program is a prerequisite for those who wish to participate in the Salt Lake County Youth Hockey League.

Class is once a week—choose between Monday, Saturday or Sunday.

Players need some basic skating ability acquired on their own or through having taken at least **one** semester of a Learn to Skate program.

COST: \$60.00/Semester (includes jersey)

Equipment requirements: *The basic, minimal equipment required for participation in the 1st three Semesters of this program include: hockey skates, hockey helmet & mask, shin guards, elbow pads, hockey gloves and hockey stick. If needed, the skates and helmet/mask rental are included in the registration fee. The shin guards, elbow pads, gloves and stick may be purchased through the Ice Center's pro shop as a package at a very reasonable price.*

See the Equipment Package flyer for details

For more information, contact:

Alan Canfield

385.468.1655

acanfield@slco.org

LEARN TO PLAY HOCKEY PROGRAM - LEVEL 1 Class times, Fall 2017

8-WEEK SEMESTER begins week of September 18

CHOOSE **ONE GROUP ONLY** FOR THE DAY OF THE WEEK YOU WANT TO ATTEND!!!

Group 1 Mon. 5:30 - 6:15 pm

Group 2 Sat. 10:30 - 11:15 am

Group 3 Sun. 12:00 - 12:45 pm

REGISTRATION FORM

Name _____ Age _____ DOB _____ Group _____

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 _____

*****Parents: If you have an interest in eventually coaching in the County Youth Hockey league, participating as a Head Instructor or an Assistant Instructor in the Learn to Play program is a great way to get started.**

Please indicate name and phone # below if you are interested.

Name _____ Phone _____

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. _____