



## COUNTY ICE CENTER

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



# 2018 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 April 6, 7 & 9th**

**Registration Begins February 26th at 9:00am**

Register in person at the County Ice Center or online at [youthhockey.slco.org](http://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.

Head instructors include **Kevan Guy** (former NHL player) and **Tyler Murphy** (former University of Utah player and current coach of the Utah Jr Grizzlies 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](mailto:acanfield@slco.org)**



# Spring Clinic 2018

Salt Lake County Youth Hockey April 6 - May 19

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 (4/6, 13, 20; 5/4,11, 18) <b>NO CLASS 4/27</b>
Group 2 Mites and Squirts	Saturdays	4:15 - 5:45 pm (4/7, 14, 21; 5/5,12, 19) <b>NO CLASS 4/28</b>
Group 3 Pee Wees and Bantams	Saturdays	6:00 - 7:30 pm (4/7, 14, 21; 5/5,12, 19) <b>NO CLASS 4/28</b>
Group 4 Pee Wees and Bantams	Mondays	7:15 - 8:45 pm (4/9,16, 23, 30; 5/7, 14)

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## 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 \_\_\_\_\_

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

- 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.
- 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.
- 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.
- 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.
- 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.
- 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. \_\_\_\_\_