**Pinnacle Hockey Off-Ice Training June/July, 2020**



**Registration Information**

Please carefully complete and sign this form. Full payment is required at the time of registration. Space is limited. If camp is full, participant registrant will be notified immediately. Please mail completed registration form and cheque to the address below. No post-dated cheques please. NSF cheques will be subject to a $30.00 Fee. Cash payments may be dropped off in person. E-transfer payments are accepted by e-mailing pinnaclehockeyschool@gmail.com. Cancelations before June 4th will be charged a 15% administration fee. Cancelations after June 4th are non-refundable. For portions of the sessions, players will be divided into age/developmental groups.

We will be closely adhering to AHS COVID-19 safety measures and as such, will not be sharing equipment. If possible, we ask that athletes bring their own yoga mat or comparable mat for ground work activities. We will be asking all athletes to maintain a minimum distance of 2 metres between themselves and any other participants during class. Masks are optional, and are to be provided by each individual athlete.

Please bring your own water, sunscreen and bug spray as there will be none provided on site.

The camps for children whose Birth Year is from 2005-2008 will be held on the following 10 scheduled times (see on next page). You may select one of two options. All 7 sessions, or any 4 sessions. Full price breakdown below.

**\*\*\* All Dryland Sessions at Chinook High School (Meeting point for all sessions is north of Chinook Library in the parking lot area next to the tennis courts) Each session will be 50 minutes in length. \*\*\***

* + 1. **Monday June 29th – 11 a.m.**
		2. **Tuesday June 30th – 11 a.m.**
		3. **Friday July 3rd – 11 a.m.**
		4. **Saturday July 4th – 11 a.m.**
		5. **Tuesday July 7th – 11 a.m.**
		6. **Friday July 10th – 11 a.m.**
		7. **Saturday July 11th – 11 a.m.**

**Total Cost for 2005-2008 birth year athletes (Options): Please advise the sessions you are signing up for. Each training session is capped at 15 participants.**

**\_\_\_\_\_\_$59 – Participation in all 7 sessions. Based on availability. Cap of 15 participants for each session.**

**\_\_\_\_\_\_$45 – Participation in any 4/7 sessions. Based on availability. Cap of 15 participants for each session.**

**Website regularly updated with spaces available in each session. www.pinnaclehockeyschool.com.**

**\*\*\* Please either email or highlight in the registration form the four sessions you would like for your child to participate in. \*\*\***

The camps for children whose Birth Year is from 2009-2012 will be held on the following 7 scheduled times (see below). You may select any four of the sessions for just $45, or all 7 for $59.

**\*\*\* All Dryland Sessions at Chinook High School (Meeting point for all sessions is north of Chinook Library in the parking lot area next to the tennis courts) Each session will be 50 minutes in length. \*\*\***

1. **Monday June 29th – 10 a.m.**
2. **Tuesday June 30th – 10 a.m.**
3. **Friday July 3rd – 10 a.m.**
4. **Saturday July 4th – 10 a.m.**
5. **Tuesday July 7th – 10 a.m.**
6. **Friday July 10th – 10 a.m.**
7. **Saturday July 11th – 10 a.m.**

**\_\_\_\_\_\_$59 – Participation in all 7 sessions. Based on availability. Cap of 15 participants for each session.**

**\_\_\_\_\_\_$45 – Participation in any 4/7 sessions. Based on availability. Cap of 15 participants for each session.**

**\*\*\* Please either email or highlight in the registration form the four sessions you would like for your child to participate in. \*\*\***

The goals of the Pinnacle off ice programs are to develop hockey players who are stronger, faster, more powerful, flexible, metabolically more efficient and less prone to develop injuries. Our strength staff works closely with participants to provide individualized attention to each player’s specific needs and goals. Off ice training activities include: – agility ladders – speed hurdles – core training – flexibility work – endurance training – strength training - balance & coordination activities. Each session will be 50 minutes in length.

**Please Print Legibly:**

Participant’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Level / Team 2019-20\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position Preference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Name(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (Incl. Postal Code)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/Town\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone(Home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Mobile)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health Card #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Past Injuries / Notable Health Information\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Notes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Liability Waiver and Medical Release**

I agree I shall provide health insurance to cover any personal injury and property damage sustained by the player while participating in any activities during Pinnacle Hockey Camp Sessions. In consideration of the participant in the Pinnacle Hockey Camps, we do hereby forever release and discharge Pinnacle Hockey Camps, its directors, Employees, and any person or corporation connected herewith from all manner of action, injury, damages, costs, claims or demands which we shall or make hereafter have, suffer or receive by reason of such participant in the program. The release shall be binding on our heirs, assigns, executors and administrations. It is agreed that Pinnacle Hockey Camps does not and shall not be considered to guarantee or warrant such equipment as maybe used in conducting of the said camp. It is further agreed that the Pinnacle Hockey School is not responsible for the loss of stolen personal articles or equipment. There are no exceptions. This is also my permission to have my child admitted and attended to for medical or dental treatment in case of sickness or injury (if parent/guardian is not present).

COVID-19 Additional Waiver

1. Participation includes possible exposure to and illness from COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and potentially death does exist and Pinnacle Hockey cannot prevent you from becoming exposed to, contracting, or spreading COVID-19 while utilizing Pinnacle Hockey's services and/or equipment. It is impossible to prevent the presence of the disease. Therefore, if you choose to utilize Pinnacle Hockey’s services you/your child may be exposing yourself to COVID-19 and/or increasing your risk of contracting or spreading COVID-19, and,

2. I, the undersigned, 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 all of Pinnacle Hockey’s stated and customary terms and conditions for participation as regards protection against COVID-19. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest Pinnacle Hockey staff member immediately; and,

4. I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Pinnacle Hockey School and their officers, directors, officials, agents, employees, other participants, owners, and lessors of all properties used to conduct Pinnacle Hockey events (“RELEASEES”), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, in connection with exposure, infection and/or spread of COVID-19 related to utilizing Pinnacle Hockey’s services and/or premises WHETHER ARISING FROM THE NEGLIGENCE OF RELEASES OR OTHERWISE, to the fullest extent permitted by law.

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against COVID-19. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child’s/ward’s presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

**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 INDUCMENT.**

I hereby agree to all terms of the Release/Waiver of Liability and Assumption of Risk Agreement:*\**

Agree

Disagree

Athletes Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name:

Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Payment: \_\_\_\_\_\_\_\_\_\_\_\_ Cash / Cheque / E-Transfer**

Send completed Registration form and cheque payable to:

**Pinnacle Hockey School**

**446 Twinriver RD. W**

**Lethbridge, AB T1J 3Y9**

**If paying by E-transfer please ensure registration is either mailed or e-mailed. E-transfers should be e-mailed to pinnaclehockeyschool@gmail.com.**

For more information Contact:

Phone: **(403)-892-9755** E-mail: **pinnaclehockeyschool@gmail.com**

Website: **www.pinnaclehockeyschool.com**

