



New England Jr. Hurricanes

Open Tryout Registration

6th, 7th & 8th grade Student Athletes for 2010-2011 Season

Major and Minor Teams

AA and AAA Players

www.topshelfhockeyschool.com

The New England Junior Hurricanes, a part of the Top Shelf HockeySM School organization, will be holding open tryouts for both a Major and a Minor Jr. High team. We are looking for skilled, knowledgeable, physical and highly competitive student athletes.

MUST BE A TEAM PLAYER AND HAVE A TEAM-SUPPORTIVE FAMILY.

Major Team will consist of 9 forwards, 6 defense, and 1 or 2 goaltenders

Minor Team will consist of 9 forwards, 6 defense, 1 or 2 goaltenders and alternates

Tryout Dates:

Sat.	February 27	12:00pm	Gallo Ice Arena	Bourne
Sun.	February 28	12:00pm	Gallo Ice Arena	Bourne
Mon.	March 1	7:00pm	Tony Kent Arena	South Dennis
Wed.	March 3	7:00pm	Tony Kent Arena	South Dennis

Attendance at ALL tryout dates highly recommended.

Cost: \$100 includes 4 fifty-minute tryout sessions.

Professional and former collegiate evaluators will be in attendance at all tryout sessions.

Registration Forms available at Hyannis Community Center, Tony Kent Arena, Gallo Ice Arena, Charles Moore Ice Arena, Play It Again Sports in Hyannis or on-line at www.topshelfhockeyschool.com **Online registration available with PayPal .**

Coaching Staff: **John Danby** – Director of Player Development **Jonathan Moore**
Paul Sherbertes – Director of Curriculum and Training **Tim Grace**

For ALL selected players, the followings apply:

Cost per player is \$1950 for full-time player, Alternates \$975 (Scheduled payments – check, money order, credit card)

Teams will play **25-30 League games** – in the Foxboro Jr. High League and **5-10** independent games vs. highly competitive programs. (Tournament games and costs will be extra.)

60 FULL ICE PRACTICES - 2 per week locally -Tony Kent, Charles Moore, new Hyannis Community Center

Home and away uniforms, practice jerseys, and team bag provided as part of tuition

Full attendance for all scheduled ice times and events expected.

Upon selection to the team, a non-refundable \$500 deposit is required by March 15th, 2010 to secure your spot. Absolutely no refunds after March 15th for any reason.

Make checks payable to: TOP SHELF HOCKEY SCHOOL, P.O. BOX 2756, HYANNIS MA 02601 508-778-5585

Player Name _____ Birth Date _____ Amount Enclosed _____

Current Team _____ Position _____

School _____ Town _____ Grade as of Sept. 2010 _____

Parent/Guardian _____ Tel # _____ Alt # _____

Address _____

Email _____

RELEASE OF LIABILITY: I hereby release Tony Kent Ice Arena, Charles Moore Arena, Gallo Ice Arena, the Hyannis Youth and Community Center, and their owners as well as Top Shelf Hockey School, instructors, and staff from any possible claims, liabilities, obligations, or responsibilities, and from any and all accidents or injuries, whether they be on the ice or off, hockey related or not, while my child participates in the program. I further certify as to my child's sound health of mind and body. I intend this instrument to take effect as a sealed instrument.

Signature of Parent/Guardian: _____ Date _____