



TOP SHELF HOCKEY SCHOOL

POWERSKATING

www.topshelfhockeyschool.com

*Speed * Endurance * Power Turns * Explosive Starts * Edges * Over Speed * Conditioning*

Our 7-week Sunday night powerskating session is one of the most popular sessions every summer. If you are looking to get in shape for your upcoming season, then this is the program for you. Last year we helped players (boys and girls) from 2nd year Mites through College strengthen their stride, refine their edges, increase foot speed and stamina. Our professional staff will work hard to get the very best out of you during each session. No need to travel off Cape. Sold out last summer. Walk-ons only if space is available. Early enrollment is highly suggested for summer of 2011. Full Hockey Equipment Required.

*Lateral Mobility * Cross Overs * Body Control * Technique * Backward Skating * Quick Stops*

7 Sunday Nights From July 10th through August 21st

2nd yr. Mites & Squirts 6:00pm -6:50pm

Peewee & Bantam 7:00pm – 7:50pm

High School, Prep, College 8:00pm – 8:50 pm

Seven Sessions \$ 110.00 **Payment Due:** June 1, 2011

Walk-ons \$18.00 per session if space available

Rink Location: Tony Kent Ice Arena, 8 South Gages Way, S. Dennis MA 02660 508-760-2400

Enrollment guaranteed upon receipt of check and form below or register online at www.topshelfhockeyschool.com Enrollment implies consent that player's image may be used on the Top Shelf Hockey School website and other promotional materials.

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

Skater's Name _____ Birthdate _____ Amount Enclosed _____

Circle One: 2nd yr. Mite * Squirt * Peewee * Bantam * High School/Prep School * College Walk-on date _____

Parent/Guardian _____ Tele # _____ cell # _____

Address _____ Email _____

RELEASE OF LIABILITY: I hereby release Tony Kent Ice Arena and its 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 I or my child participates in the program. I further certify as to my or my child's sound health of mind and body. I intend this instrument to take effect as a sealed instrument.

Signature (Parent/Guardian if nec.): _____ Date _____

Top Shelf Hockey School Powerskating 2011