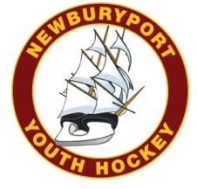


# NEWBURYPORT YOUTH HOCKEY LEAGUE

## Learn to Play Hockey Program



**The goal of the Program is to teach girls and boys basic hockey skills while at the same time creating a fun environment for both the children and their parents**

Each 50 minute session will consist of:

- 10 minute skate around to stretch and warm-up
- 25 minutes of instruction at different skill stations to stress the following:
  - Balance and stance
  - Starting and stopping
  - Skating forward and backward with the puck
  - Passing and receiving the puck
  - Shooting the puck
  - Cross-over skating (strong-side and weak-side)
- 15 minutes of cross-ice scrimmage as follows:
  - Three simultaneous games of 4x4 hockey
  - Teams will be balanced and different each week
  - No scoring or statistics will be kept, only FUN! FUN! FUN!

Recommended equipment (at a minimum):

- Hockey Helmet **WITH MASK (Required)**
- Skates and Hockey Stick
- Shin Pads, Elbow Pads and Gloves (Not necessarily hockey gloves at this point)

The fee for five (5) LTP sessions is **\$75.00** per child if presently registered in NYHL Learn to Skate, and **\$100** if new to the program. The sessions are scheduled as follows at the Graf Rink:

1. Sunday, March 14, 2010 10am-10:50am
2. Saturday, March 20, 2010 11:00am-11:50am
3. Sunday, March 21, 2010 10:00am – 10:50am
4. Saturday, March 27, 2010 11:00am-11:50am
5. Sunday, March 28, 2010 10am-10:50am

**Registration will take place on Sunday mornings for the months of January and February at the Graf Rink between 10:00 and 11:00 A.M.—Learn to Skate Hour.**

The Newburyport Youth Hockey League disclaims any liability for personal injury or property damage arising from the registrant's participation in any and all activities, whether on or off the ice, of the NYHL. All participants assume all risks incident, inherent, or in any manner occurring, and without limiting the generality of the foregoing injury.

The player listed below and his/her family releases the NYHL from any and all claims, as agreed to on the date of \_\_\_\_\_ by signing below.

**PLAYER NAME:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **Email ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_

**PARENT/GUARDIAN (Please Print):** \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_