

STR

Stamford Twin Rinks Presents:

Holiday Hockey Camp

Dec. 26-27-28-29-30

- Camp #1: Mite House Skills – 10:00-11:30am - \$250
- Camp #2: Squirt / Pee Wee House Skills– 11:30-1:00pm - \$250
- Camp #3: Dynamites – 1:00-2:00pm - \$150
- Camp #4: 10 & Under Travel – 2:00-3:30pm - \$250
- Camp #5: 11 & Older Travel – 3:30-5:00pm - \$250

Drop in rate \$60 per day / Dynamites \$35 per day



- Power Skating
- Shooting
- Passing
- Battle Drills
- Scrimmage



Holiday Hockey Camp-\$250

Dec. 26-27-28-29-30

Name: _____ Date of Birth: _____

Parent(s) Name: _____ E-mail: _____

Phone# Day: _____ Other: _____

Address: _____ City: _____ State: _____ Zip: _____

Camp(circle one): #1 #2 #3 #4 #5

Method of payment: _____ exp. _____

Drop in rate \$60 per day / Dynamites \$35 per day

Make checks payable to STR – 1063-Hope Street – Stamford, CT 06907

www.STRHockey.com / 203-968-9000x17 – Fax 203-321-1522

*Agreement/Waiver: I agree I shall provide health insurance or other applicable insurance to cover any personal injury or property damage sustained by the student/player/parent while participating in any event/camp/clinic/game at the Stamford Twin Rinks. I understand ice hockey is a dangerous sport and injury, paralysis even death may result. I therefore release and forever discharge the Stamford Twin Rinks and its staff from any demands, cause of action, suits or liabilities from any damages, whether emotional, physical or property, which I was a student, player or spectator; or my child was/is a student, player or spectator, while participating in any STR programs. STR also holds the right to a NO-REFUND POLICY, regardless of the student or parent's reason for cancellation.

Parent Name (print): _____ Signature: _____ Date: _____

GOALIES PLAY FOR FREE!!