

COMPLETE HOCKEY
ELITE TRAINING
JULY 5–AUGUST 4, 2010, EDGE ICE ARENA

The Elite Training Clinic is a new clinic developed for 2010 and will be operated by Coaches Larry Pedrie (on-ice) and Chris Wickersham (off-ice).

The purpose of the clinic will be to maximize player development over a 5 week period by combining on-ice and off-ice instruction, and limiting enrollment to elite level players only, so top players compete with and against top players.

Development will focus in 4 specific areas:

- 1) Skills (on-ice)
- 2) Competitive spirit (on ice)
- 3) conditioning/endurance (on-ice & off-ice)
- 4) Hockey specific strength building (off-ice)

FORMAT

The clinic will take place over a 5 consecutive week period with 2 training sessions per week. Specific dates are noted below.

STRUCTURE

Each on-ice session will consist of the following:

- 1) Skill development training done at top speed. Skills to be focused on are skating (acceleration, agility, quickness), puckhandling, passing, and shooting.
- 2) Competitive Spirit training, including puck races, puck battles, puck protection, and ice area battles.
- 3) Conditioning/endurance training, including short sprint/high speed acceleration drills.

Each off-ice session will consist of drills and exercises geared toward the development of hockey specific muscle groups targeting improved explosiveness, quickness, and speed.

DATES and TIMES, all sessions at the Edge East

Day	On ice	Off Ice
July 5, 12, 14, 26, 28, Aug 2, 4	1:20-2:20PM	2:45-3:45PM
July 7	3:20-4:20PM	4:45-5:45PM
July 19, 21	5:40-6:40PM	7:00-8:00PM

COST

\$500, please make checks payable to Complete Hockey and forward to:

Complete Hockey, 708 Teri Ln., Yorkville, IL 60560

COMPLETE HOCKEY

2010 APPLICATION FORM

SELECT CAMP (please circle): Just Defensemen , \$175 Elite Training, \$500

Name _____

Address _____

City _____ ST _____ Zip _____

Email _____

Phone 1 _____ Phone 2 _____

Date of Birth _____ Ht _____ Wt _____

2009-2010 Team and Level (AAA, CSDHL, Gold) _____

Payment Info: Please make checks payable to Complete Hockey and mail completed application with payment to: Complete Hockey, 708 Teri Ln., Yorkville, IL 60560

For more info contact Larry Pedrie, 630-440-7595.

Enrollment Agreement & Release

In consideration to my enrollment and participation in the Complete Hockey (hereinafter referred to as CH) JUST DEFENSEMEN hockey camp, I hereby release and discharge CH, together with their agents, employees, officers, owners, volunteers, and all other participants forward on behalf of myself, my children, my parents, my heirs, and assigns as follows:

1. I acknowledge that the sport of hockey involves known and unknown risks which could result in physical or emotional injury, paralysis, death, or damage to participants, to myself, to property, or to third parties, and that such risks simply cannot be eliminated. To that end, I further acknowledge that CH is not responsible for a participant's fitness, abilities, or the equipment being used.
 2. I acknowledge and agree to accept and assume any and all of the risks attendant to this activity. My child's participation in this activity is purely voluntary and I elect to participate notwithstanding the risks.
 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless CH from any and all claims, demands, or causes of action which are in any way connected with my child's participation in this activity or my use of CH equipment or facilities whether "on" or "off" the ice, including any claims which allege negligent acts or omissions on the part of CH.
 4. In the event CH, or anyone acting on their behalf, is required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold harmless for all such fees and costs.
 5. I certify that my child has adequate insurance coverage for any injury or damage I may cause or suffer while participating, and I agree to bear any and all costs of such injury or damage. I further certify that my child has no medical or physical conditions which could interfere with my safety in this activity, and I am willing to assume all risks and costs that may result, directly or indirectly, from any such condition.
- By signing this document, I acknowledge that if anyone is hurt or property is damaged during my child's participation in this activity, I have waived my rights to maintain a lawsuit against CH. I have had sufficient opportunity to read this entire document. I understand it and I agree to be bound by its terms.

Date _____

Participant's Name (printed) _____

Participant's Signature _____

Parent's Signature _____