

SKILLS THIS CAMP FOCUSES ON...

The focus **FOR FORWARDS** enrolling in this camp will be skills and high flow drills. We will work on techniques to improve your puck control, skating, passing, and shooting while incorporating overspeed skating for quickness.

**Tools learned in this camp:**

- Finding open ice
- What to do with and without the puck
- Positioning in all 3 zones - offensive, defensive, and neutral
- Being creative on 1 on 1, 2 on 1, 2 on 2, and 3 on 2
- When to shoot or pass
- Where to shoot for more scoring chances

If you are enrolling as **A DEFENSEMEN**, you will be learning proper technique for puck control, shooting, passing, backward skating, pivoting and transition balance for left to right.

**Instruction will include:**

- Front of net play
- Working the Corners
- Gap Control
- Puck protection
- How to use the stick
- Positioning
- When to jump up in the rush

**FOR HOUSE, BRONZE, AND SILVER PLAYERS ONLY**

DATES AND FEES

**WEEK 1 JULY 7 - 11**

**WEEK 2 JULY 21 - 25**

***MITES  
SQUIRTS  
PEEWEE  
BANTAMS  
ONLY \$400***

*Fee includes a jersey and lunch!*

GENERAL INFORMATION

**ICE TIME! ICE TIME! ICE TIME!**

**\* 5 hours of Ice Time Per Day**

**ICE TIME - WHAT EVERYBODY NEEDS!**

SCHEDULE

<b>9:00 - 11:00</b>	<b>ICE TIME</b>
<b>11:00 - 11:50</b>	<b>LUNCH &amp; GAMES</b>
<b>12:00 - 2:00</b>	<b>ICE TIME</b>
<b>2:10 - 3:10</b>	<b>SCRIMMAGE</b>

**For more information contact  
Chris Cimoch at 708.403.4231 x138**

**Ice Time Skills Camp – 2014  
APPLICATION**

NAME \_\_\_\_\_  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_  
 STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 PHONE (H) \_\_\_\_\_ (W) \_\_\_\_\_  
 BIRTH DATE \_\_\_\_\_ HT \_\_\_\_\_ WT \_\_\_\_\_  
 USA HOCKEY # \_\_\_\_\_  
 E-MAIL \_\_\_\_\_  
 12-13 TEAM \_\_\_\_\_  
 POSITION \_\_\_\_\_  
 JERSEY SIZE \_\_\_\_\_

CAMP YOU ARE ENROLLING IN (CIRCLE ONE)

<input type="checkbox"/> MITE	<input type="checkbox"/> SQUIRT	<input type="checkbox"/> PEEWEE	<input type="checkbox"/> BANTAM
<input type="checkbox"/> HOUSE	<input type="checkbox"/> TRAVEL		

WEEK YOU ARE ENROLLING IN: **Week 1** **Week 2** **Both**

**METHOD OF PAYMENT**

Please indicate the method of payment for \$400 (per week) enclosed with Application:

CASH  CHECK  CREDIT CARD

Amount Enclosed \$ \_\_\_\_\_  
 All returned checks are subject to a \$25 NSF fee  
**NOTE: Do not forward cash payments with mailed applications.**

**Make checks payable to: Arctic Ice Arena**

**Credit Card Users Only:**

Visa  MasterCard  Discover  AmEx Exp. \_\_\_\_/\_\_\_\_  
 CARD #

Full Name of Cardholder (Please Print) \_\_\_\_\_ Signature of Cardholder \_\_\_\_\_

**Hold Harmless Agreement**

I agree to release Arctic Ice Arena and any of its respective affiliates, owners, members, shareholders, subsidiaries, directors, officers, employees, and all agents from claims, actions, causes of actions, damages to or by the undersigned person, their parents/guardians for loss of injury resulting directly from the participation of such person in this program. I further agree to indemnify and save harmless such parties from claims, actions, damages or demands, from such participation in this program, including all costs and expenses incurred in defending any such claims or actions. I have read the release and understand this is a full final release of claims for injury and damages sustained in Arctic Ice Arena and have read over the agreement and understand the responsibilities I have assumed thereunder.

I also agree that my name and image may be used in perpetuity in any photographs, motion picture films, television broadcasts, and/or in any radio broadcasts of Arctic Ice Arena without payment of funds to holder in connection therewith.



Print Player Name \_\_\_\_\_ Signature \_\_\_\_\_

Print Parent/Guardian Name \_\_\_\_\_ Signature \_\_\_\_\_

FOR MORE INFORMATION  
call 708-403-4231 x119  
or 708.403.4231 x138

\*This camp is offered to  
House and Travel A/AA Players  
\*Groups are separated by  
age and level of play  
to maximize development

**Christopher Cimoch**

**Mitch Stevens**

**Chris Cimoch**

**Darren McClusky**

**INSTRUCTORS**



**ARCTIC**

**SKILLS CAMP**

www.arcticicearena.com

Arctic Ice Arena  
10700 West 160th Street  
Orland Park, IL 60467  
Phone 708.403.4231 Fax 708.403.4248

**LIMITED ENROLLMENT**



**TWICE THE ICE  
FOR THE PRICE!**  
\*This camp is offered to  
House and Travel A/AA Players  
\*Groups are separated by  
age and level of play  
to maximize development

**ICE TIME  
ICE TIME**

**2019**

**SKILLS CAMP**

**ARCTIC**