



HOCKEY CAMP 2024 REGISTRATION FORM

\$295 per week (9:30am-12:30pm; for ages 6-12)

Camper's Name _____ ☐ Female ☐ Male Birth date _____

Street Address _____ City _____ Zip _____

Mother's Name _____ Cell Ph. _____ Work Ph. _____

Father's Name _____ Cell Ph. _____ Work Ph. _____

Email _____

Who is authorized to pick up child (list full name(s) and relationship to camper): _____

Full gear required.

How did you hear about Hockey Camp? ☐ Picked up literature on-site ☐ Word of mouth ☐ Hockey class
☐ Attended Hockey Camp previously ☐ Other _____

\$295 per week; \$65 per day.

Campers dropped off early or picked up late will incur a \$1 per minute charge

Hockey Camp June 10-14, 2024

___ **Entry level:** skill level equivalent to Little Sharks, Hockey 1 or above

___ **Elite level:** skill level equivalent to Youth House League and/or Travel Hockey

☐ **Drop-in date(s):** \$65 per day _____

Years of hockey experience: _____

Send completed registration form along with payment and Release of Liability/Consent to Treat Form to: Skatetown Ice Arena, 1009 Orlando Ave., Roseville, CA 95661 or fax it to 916.783.9235

Skatetown reserves the right to photograph activities and program participants for potential future use in advertising materials, TV commercials and Website. All photos will remain the property of Skatetown.

Skatetown's Federal Tax ID number: 68-0390658

Skatetown use only: Paid \$ _____ Date _____ Enrollment #: _____ Initials _____

☐ All data entered by cashier ☐ Application routed to Camp Director

Skatetown Ice Arena, 1009 Orlando Avenue, Roseville CA 95661 | 916.783.8550

www.skatetown.biz

S:\General\Forms\Camp Cool\New folder\HOCKEY CAMP 2024 REGISTRATION FORM.docx