



STOUFFVILLE SPIRIT JR. A HOCKEY CLUB

www.stouffvillespirit.com

UPDATED: FRIDAY APRIL 9, 2010

Dear Potential Spirit Player,

The Stouffville Spirit of the Ontario Provincial Jr. "A" hockey league would like to invite you to attend our rookie camp for the 2010-2011 season.

We are currently looking to fill roster spots and are looking for talented, intelligent, dedicated and determined hockey players to complete our roster. The camp will be held on Friday, April 30th-Sunday May 2nd, 2010 at the Stouffville Arena in Stouffville, Ontario.

Dates & Times:	Friday April 30th	7:00 PM to 11:00 PM
	Saturday May 1st	9:00 AM to 8:30 pm
	Sunday May 2nd	9:00 AM to 3:00 pm
	COST: \$195.00 PER PLAYER	

Due to the high volume of eligible players to try out for this camp it will be limited to 126 skaters, consisting of 18 goaltenders, 36 defensemen, and 72 forwards. This will ensure a complete and full evaluation of your skills and talent. The camp will consist of 4 refereed hockey games, plus you will also receive a Spirit Rookie Jersey at the camp. Players are required to supply all of their own equipment for rookie camp. This includes sticks, tape, helmets with cages or half visors plus mouth guards. To ensure a spot for the Rookie Camp please return your **Registration** and **Medical** Forms along with a cheque in the amount of \$195.00 payable to the Stouffville Spirit **NO LATER THAN April 27th, 2010**, in order to reserve your spot to:

**Stouffville Spirit Jr. "A" Hockey Club,
80 William Street
Stouffville, ONT. L4A 1B3**

You will be notified approximately 2 days prior to the camp, by either telephone or Email as to your team color and number.

The Stouffville Spirit Jr. "A" Hockey club provides hockey players the opportunity to develop skills both on and off the ice. Many former players have gone on to U.S. College hockey (NCAA), in the Ontario Hockey League (OHL), and in the National Hockey League (NHL), while an even larger number are now upstanding members of our community.

Registration is open to: Jr."B", Jr."C", Jr."D", AAA, and AA Midgets & Minor Midgets, Juveniles.



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2010-2011 ROOKIE CAMP REGISTRATION FORM

Name: _____

Date of Birth: Day _____ Month _____ Year _____

Address: _____

City: _____

Postal Code: _____

Home Telephone: _____

Cell Phone: _____

Email: _____

Team (2009-2010): _____

Position: _____

Stats: G: _____ A: _____ PTS: _____ PIM: _____

Goalies Only: GAA: _____ SV%: _____ W: _____ L: _____ T: _____

Please Note:

Registration is open to **Jr. "B", Jr. "C" Jr. "D", AAA, AA Midget and Juvenile**
Please complete this form, AND THE PERMISSION TO SKATE FORM and return with your payment to:

**Stouffville Spirit Jr. "A" Hockey Club,
80 William Street
Stouffville, ONT. L4A 1B3
Attn: Ken Burrows**



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WAIVER OF CLAIMS AND MEDICAL RELEASE

I the undersigned, acknowledge that the Stouffville Spirit Hockey Club involves vigorous exertion and activity and the game of hockey involves risks and dangers of personal injury. I hereby release the Stouffville Spirit Jr. "A" hockey club its officers, directors, employees and medical staff from any and all liability for physical injuries rising or resulting from my attendance and participation in the Stouffville Spirit rookie camp.

I further acknowledge that I presently suffer from no medical or physical conditions which have not been disclosed in full to the Stouffville Spirit Jr. "A" hockey club and to the best of my knowledge I am physically able to partake in the Stouffville Spirit hockey club rookie camp.

I, the undersigned, do hereby consent to and authorize the Stouffville Spirit medical staff to provide any and all medical information concerning my mental and physical condition to the Stouffville Spirit and coaching staff.

I have read and understand this waiver and release agreement. I' am not relying on my oral or written presentation or statements made by any representative of the Stouffville Spirit Hockey Club.

Name of Participant: _____

Signature of participant: _____ Date: _____

Name of parent (Guardian) _____

Signature of Parent (Guardian) _____ Date: _____

Please Mail Along With Your Application to:

**Stouffville Spirit Jr. "A" Hockey Club,
80 William Street
Stouffville, ON., L4A 1B3
Attn: Ken Burrows**

If you have any questions or concerns, please call Ken Burrows at **416-990-2683** or e-mail him at **kenshockey@hotmail.com**