

# CAMBRIDGE ISANTI

HIGH SCHOOL HOCKEY

## 2019 BLUEJACKET SUMMER TRAINING PROGRAM (STP) REGISTRATION FORM

**PROGRAM INCLUDES:**

- On-Ice Training
- Off-Ice Training (following practice)
- Bluejacket T-shirt
- Possible Scrimmages (BT & HS groups)  
Players invited based on ability to compete at level of play. May include additional cost.

**HOCKEY STAFF - INSTRUCTORS:**

- Cambridge-Isanti High School Boys Bluejacket Varsity Coaching Staff, including Varsity Hockey Players.
- Jake Sibell will be assisting the High School Staff with Bantam and High School Goaltenders (Jake is currently playing with the Sioux City Musketeers of the United States Hockey League-USHL).

**PRACTICE ICE TIMES:**

- HS – High School.....7:15-8:45am
- BT – Bantam.....8:15-9:15am
- PW – PeeWee.....9:30-10:30am
- SQ – Squirt.....10:45-11:45am
- 30 min. of dryland each day following ice time.

**REGISTRATION:**

- Registration & Payment due by **May 25, 2019**
- Submit this form with check to:

**Jarad Ziebarth**  
2729 319<sup>th</sup> Lane NE  
Cambridge, MN 55008

SCHEDULE:					
Date	Day	Groups Practicing:	Date	Day	Groups Practicing:
06/11/19	Tuesday	HS, BT	07/9/19	Tuesday	HS, BT, PW, SQ
06/13/19	Thursday	HS, BT	07/11/19	Thursday	HS, BT, PW, SQ
06/18/19	Tuesday	HS, BT, PW, SQ	07/16/19	Tuesday	HS, BT, PW, SQ
06/20/19	Thursday	HS, BT, PW, SQ	07/18/19	Thursday	HS, BT, PW, SQ
06/25/19	Tuesday	HS, BT, PW, SQ	07/23/19	Tuesday	HS, BT, PW, SQ
06/27/19	Thursday	HS, BT, PW, SQ	07/25/19	Thursday	HS, BT, PW, SQ
Jarad Ziebarth (763-377-2880) <a href="mailto:jziebarth@c-schools.org">jziebarth@c-schools.org</a>			PRACTICE LOCATION: ISANTI ICE ARENA		

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**PARENT CONSENT/WAIVER OF LIABILITY:**

We, the undersigned participant and parent/guardians, agree that any participation in the Bluejacket Boys Hockey Program at the participants own risk. The Coaches/Players shall not be liable for any damages arising from personal injuries or any personal or property damages that may occur to the participant while involved in any program activities or events. We reserve the exclusive right to have administered any emergency medical or surgical treatment recommended by a physician licensed to practice medicine in the state of Minnesota. If emergency transportation is deemed necessary, authorization has been granted to summon an ambulance to transport the participant to the hospital or nearest facility based on the conditions pertaining to the incident, and that if ambulance transport or emergency treatment is deemed necessary, the parent/guardian may not be notified until after transport has been initiated. It is the participant's responsibility to be properly insured and/or pay all medical costs in the event of an injury.

We, the undersigned participant and parents/guardian, hereby acknowledge that we have read the foregoing; have explained its meaning to our player; understand its content, importance, and meaning; and hereby do approve consent to the terms and conditions above. We further represent that we are the parent(s) or legal guardian(s) of the named participant applicant, that the information given on this form is complete and accurate and consent to the participation of the participant in the Bluejacket Boys Hockey Program.

<b>PLAYER NAME:</b>	<b>DATE:</b>
<b>PARENT NAME:</b>	<b>PHONE:</b>
<b>PARENT SIGNATURE:</b>	<b>EMAIL:</b>
<b>EMERGENCY CONTACT:</b>	<b>PHONE:</b>
T-SHIRT SIZE: <input type="checkbox"/> Youth S <input type="checkbox"/> Youth M <input type="checkbox"/> Youth L <input type="checkbox"/> Youth XL <input type="checkbox"/> Adult S <input type="checkbox"/> Adult M <input type="checkbox"/> Adult L <input type="checkbox"/> Adult XL	
HIGH SCHOOL SKATER: <input type="checkbox"/> \$250   BANTAM SKATER: <input type="checkbox"/> \$175   PEEWEE SKATER: <input type="checkbox"/> \$150   SQUIRT SKATER: <input type="checkbox"/> \$150	
HIGH SCHOOL GOALIE: <input type="checkbox"/> \$75   BANTAM GOALIE: <input type="checkbox"/> \$75   PEEWEE GOALIE: <input type="checkbox"/> \$50   SQUIRT GOALIE: <input type="checkbox"/> \$50	

\*\*Contact Coach Ziebarth at 763-377-2880 or [jziebarth@c-ischools.org](mailto:jziebarth@c-ischools.org) with any questions\*\*