Taunton Hockey Youth Development Clinic

Come Join Taunton High School Coaches and Players for FREE clinic during the 2020 Spring!

Friday, April 10th

K-4th Grade Players 9:30-10:35am

5th-7th Grade Players 10:45am-12pm

Aleixo Arena, Taunton, MA

Clinic is open to all players of Taunton residency K-7th Grade
(Players must have skating/playing experience, this is not a learn to skate program)

Capped at 25 players per group

For more information, please contact:

Head Coach Kris Metea

kmetea@tauntonschools.org
Please fill out the following info and return to Coach Metea:

Player Name: ____________________________ D.O.B.____/____/____ Position: _________

School: _________________________________ Grade: __________________________

Last Team: ______________________________________ Level: _________________

Hometown, State, Zip Code: ______________________________________

Parent Cell Phone: ____________________________ Parent Email: ____________________________

Insurance Company: ____________________________ Policy Number: _____________________

Referred by: ______________________________

Check off which Camp Session you would like your son/daughter to participate in (Players can do both):

_____ K-4th Grade 9:30-10:45am

_____ 5th-7th Grade 10:45am-12pm

Mail to: Taunton High School Hockey
Attn: Kris Metea
Taunton High School
50 Williams Street
Taunton, MA 02780

In Case of Emergency we should contact: ____________________________

Cell #_____________________________ Relationship______________________________

**Release Waiver, assumption of risk and indemnification:**
Upon entering events sponsored by Taunton High School, Kris Metea, Coaches et al., the owners/members of participating rink facilities, I/We agree to abide by the rules and policies of the game of hockey, the arena, and camp/tournament supervision. I/We understand and appreciate that participation or observation of the sport constitutes a risk to me/us of serious injury, including permanent paralysis, or death. I/We voluntarily and knowingly recognize, accept, and assume this risk for myself/my child and release Taunton High School, Kris Metea, Coaches et al., THS Face-Off Club, volunteers, participating rink facilities, its affiliates, owners, their sponsors or organizers from any liability therefore, and any suits, claims, or demands of any kind for personal injuries, property damage that I or my child may sustain while participating in the hockey program and/or other hockey related activities.

I have read and understand the Release of Liability and agree to terms and conditions specified therein:

Name_________________________________ Signature__________________________ Date______________