



Next Level Summer Hockey Camp

June 3rd-June 7th

\$295*

Monday-Thursday 8:00AM-3:00PM, Friday 8:00AM-12:00PM

Optional Aftercare: \$20/day 3:00PM-6:00PM

Camp Includes:

9+ hours of on Ice Instruction

Rapid Shot Shooting Room Training

Off Ice Instruction

Camp Jersey

Daily Lunch

Daily Public Skating Session

Skating

Stride length, quickness, acceleration, balance, edge control & explosive starts

Puck Handling

Cradling the puck, keeping head up, protecting the puck, puck positioning

Shooting

Forehand, backhand, snap-shot, slap-shot, one-timer, quick release, shooting in stride, accuracy, shooting angles

Passing

Presenting a target, aiming at target, forehand passing, backhand passing, passing in motion, receiving in motion, leading the player with pass

Goalie Specific Training

Stance and positioning, angles, skating, edgework, save technique, rebound control, passing and game situations

Instruction and Guidance from the following:

Anthony Noreen

Tri-City Storm Head Coach
USHL 2018-2019 Coach of the Year

Nick Brusa

Current USHL Assistant Coach

Kenny Brooks

Former NCAA D1 and Professional Player
Current USHL Assistant Coach

Brittney Brooks

Former NCAA D1 Goaltender

If you have any questions about the NEXTLEVEL Camp please contact Brittney Brooks at Brittney@lasvegasice.com

No refunds for missed sessions

*Enroll by May 24th for Early Bird Discount



MEDICAL CONSENT

This form must be received by NEXTLEVEL staff prior to the camp in order for the player to participate.

Child's Name (participant): _____

Camp Name: ___NEXT LEVEL HOCKEY CAMP_____ Date(s): _____

I understand that the NEXTLEVEL Hockey Camp does not provide medical insurance of any kind. I hereby acknowledge and agree that I will look solely to my own medical insurance for medical costs and expenses incurred as a result of any accidents and injuries that occur to the above player while participating in the NEXTLEVEL Hockey Camp.

Parent/Legal Guardian: _____ Date: _____

PRIVATE MEDICAL INSURANCE: Please supply the following information, if applicable:

Participants SSN: (if applicable) _____ Date of Birth: _____

Insurer: _____ Policy # _____

Group Number: _____ Plan Name/Number: _____

Policy Holder Name: _____ Relationship: _____

Preferred Hospital and/or Physician: _____

CONSENT TO MEDICAL TREATMENT

The undersigned parent(s) or legal guardian(s) of the above named player do hereby consent and grant NEXTLEVEL Hockey Camp and NEXTLEVEL Hockey Camp/ Las Vegas Ice Center employees, staff, coaches and trainers or medical physician(s) the authority to see, obtain, approve and provide any medical treatment for the above named player that in their judgment is necessary for the health and well-being of the player during his or her participation in the camp. The undersigned further give the above referenced individuals and entities permission to secure emergency medical and/or surgical treatment to the player and to transport the player to appropriate medical facilities if necessary while attending and participating in the NEXTLEVEL Hockey Camp. The undersigned further agrees to release, hold harmless and indemnify NEXTLEVEL Hockey Camp and NEXTLEVEL Hockey Camp/ Las Vegas Ice Center employees, staff, coaches and trainers from any claims or damages which may arise from any accident or loss, however caused.

Parent/Legal Guardian Signature: _____ Date: _____

Parent/Legal Guardian Signature: _____ Date: _____

LIABILITY WAIVER AND RELEASE

Participant/Parent/Guardian Waiver and Release - I, on behalf of myself or my Child, as applicable, **HEREBY WAIVE AND RELEASE**, indemnify, hold harmless and forever discharge the LAS VEGAS ICE CENTER and its agents, employees, officers, directors, owners, affiliates, successors and assigns, from and against any and all claims, demands, debts, contracts, expenses, causes of action, lawsuits, damages and liabilities, of every kind and nature, whether known or unknown, in law or equity, that I and/or my Child ever had or may have, arising from or in any way related to my participation in any of the events or activities conducted by, on the premises of, or for the benefit of, the LAS VEGAS ICE CENTER; provided, however, that this waiver and release of liability does not apply to any acts of gross negligence, or intentional, willful or wanton misconduct. I understand that the activities I and/or my child will participate in are inherently dangerous and may cause serious or grievous injuries, including bodily injury, damage to personal property and/or death. On behalf of myself, my Child, my heirs, assigns and next of kin, my Child and/or I waive all claims for damages, injuries and death sustained to me/my Child or my/my Child's property that I/my Child may have against the aforementioned released party to such activity. **I HAVE READ, UNDERSTAND AND FULLY AGREE TO THE TERMS OF THIS WAIVER AND RELEASE. I UNDERSTAND AND CONFIRM THAT BY SIGNING THIS WAIVER AND RELEASE MY CHILD AND/OR I HAVE GIVEN UP CONSIDERABLE FUTURE LEGAL RIGHTS. I HAVE SIGNED THIS AGREEMENT FREELY, VOLUNTARILY, UNDER NO DURESS OR THREAT OF DURESS, WITHOUT INDUCEMENT, PROMISE OR GUARANTEE BEING COMMUNICATED TO ME. MY SIGNATURE IS PROOF OF MY INTENTION TO EXECUTE A COMPLETE AND UNCONDITIONAL WAIVER AND RELEASE OF ALL LIABILITY TO THE FULL EXTENT OF THE LAW. I AM 18 YEARS OF AGE OR OLDER AND MENTALLY COMPETENT TO ENTER INTO THIS WAIVER.**

Parent/ Guardian Name

Signature

Date

AFTER CARE 3:00-6:00PM

\$20 per day Monday-Thursday

After care will include movies, games, and optional skating (if ice schedule allows)

After care payments will be accepted at the start of the week or daily as needed

Please check days your child will be attending after care.

- Monday (6/3/19)
- Tuesday (6/4/19)
- Wednesday (6/5/19)
- Thursday (6/6/19)

Sample Daily Schedule

Group One

8:00- 8:30 Registration/Drop Off

8:45-9:45 Off Ice Warm Ups/Dryland Training

9:45-10:15 Gear on

10:15-11:15 First Ice Session (Skating/Goalie Skills)

11:15-11:30 Gear Off

11:30-12:15 Lunch at Brooksy's

12:15-12:45 Gear on

12:45-1:45 Second Ice Session (Skills/Small Area Games)

1:45-2:00 Gear Off/Skates on

2:00-3:00 Public Skate/Shooting Room/Off Ice Activities

Group Two

8:00-8:30 Drop Off

9:00-10:00 First Ice Session (Skating/Goalie Skills)

10:00-10:30 Gear off

10:30-11:30 Dryland Training

11:30-12:15 Lunch at Brooksy's

12:15-12:30 Skates On

12:30- 1:30 Public Skate/ Shooting Room/Off Ice Activities

1:30-2:00 Gear On

2:00-3:00 Second Ice Session