

Player's Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Parents Name \_\_\_\_\_

Telephone # \_\_\_\_\_

Age \_\_\_\_\_ Jersey Size \_\_\_\_\_

Adult - S M L XL

Youth- M L

Pos. \_\_\_\_\_

Need housing... Yes \_\_\_ No \_\_\_

Circle the appropriate level you will be playing during the 2009-10 hockey season.

H.S. Varsity                      H.S. Jr. Varsity

Bantams                          PeeWees

Squirts                          Mites

Girls 12 & under              Girls 14 & under

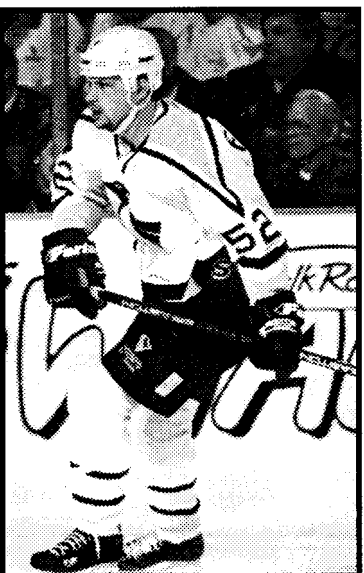
The applicant agrees that the Silver Bay Blue Line Club and its employees will not be held responsible for any accidents or loss, however caused, and agrees to release the operators from all claims or damages which might arise. I hereby give permission for:

\_\_\_\_\_ to participate in the Silver Bay Blue Line Club Summer Hockey School. I am assuming all risks and hazards incidental to the conduct of this activity.

Parent/Guardian

Date

**SILVER BAY BLUE LINE  
SUMMER HOCKEY SCHOOL  
BOX 147  
SILVER BAY, MN 55614**



**26<sup>th</sup> ANNUAL  
SILVER BAY BLUE LINE  
SUMMER HOCKEY  
SCHOOL**

**JULY 25<sup>th</sup> - AUG. 2<sup>nd</sup>, 2009**



- 1 hr. 10 min. On-Ice Instruction Each Day
- 1 hr. Scrimmage/Game Each Day
- Open Skating Each day
- Power Skating Each day
- Controlled Scrimmages
- Special Goalie Training
- Instructional Films
- Puck Shooting Machine
- Dryland Training
- Team and Individual Skills
- Shooting Instruction
- Golf
- Tennis
- Swimming