



Summer 2017 Training Program

Skating

Strength Training

Stick-handling/Shooting

Sports Nutrition

Sports Psychology

Beginning Week of June 19th through Week of August 14th at Kensington Valley Ice House

Summer Hours of Operation

ON-ICE TRAINING

Monday-Friday

7:00am to 1:15pm

STRENGTH AND CONDITIONING TRAINING

Monday-Friday

7:00am to 3:00pm

Please circle the days of the week & check the times you are requesting. We will do our best to meet your requests.

OPTIONS for ON-ICE

DAYS: Mondays

Tuesdays

Wednesdays

Thursdays

TIMES: 7:00 – 9:15am

9:45 to 12:00pm

12:15pm to 1:15pm

OPTIONS for OFF-ICE Training

DAYS: Mondays

Tuesdays

Wednesdays

Thursdays

Fridays

TIMES: 7:00am – 8:15am

8:15am - 9:30am

9:30am - 10:45pm

11:00pm – 12:30pm

1:30pm - 3:00pm

Session and Dates Offered

8-9 week session: Weeks of June 19th – August 14th

First, 3-5 week session: Weeks of June 20th – July 17th

Second, 3-5 week session: Weeks of July 17th – August 14th

****NO TRAINING ON JULY 3rd and 4th, 2017**

Summer 2017 Trainers: Please check the instructor(s) you are requesting for on-ice instruction.

Jennifer Matras, Head skating skills instructor

Doug Raymond, associate skating skills instructor

Josh Coenen, Strength and Conditioning Coach

Prices for on ice instruction:

30 mins of instruction one day/wk (beginners only)	___ 8-9 wks, \$300 plus \$150 for ice	___ 3-5 wks, \$200 plus \$75 for ice
45 minutes of instruction one day/week	___ 8-9 weeks, \$450 plus \$150 for ice	___ 3-5 weeks, \$295 plus \$75 for ice
60 minutes of instruction one day/week	___ 8-9 weeks, \$595 plus \$150 for ice	___ 3-5 weeks, \$375 plus \$75 for ice
45 minutes of instruction two days/ week	___ 8-9 weeks, \$900 plus \$300 for ice	___ 3-5 weeks, \$590 plus \$150 for ice
60 minutes of instruction two days/ week	___ 8-9 weeks, \$1100 plus \$300 for ice	___ 3-5 weeks, \$725 plus \$150 for ice

Packages for on-ice lessons and weight training:

60 minutes of instruction and 1 weight training session one day/week	___ 8-9 weeks, \$755 plus \$150 for ice	___ 3-5 weeks, \$485 plus \$75 for ice
60 minutes of instruction and 1 weight training session two days/week	___ 8-9 weeks, \$1420 plus \$300 for ice	___ 3-5 weeks, \$945 plus \$150 for ice
90 minutes of instruction and 1 weight training session one day/week	___ 8-9 weeks, \$1055 plus \$150 for ice	___ 3-5 weeks, \$1145 plus \$75 for ice
90 minutes of instruction and 1 weight training session two days/week	___ 8-9 weeks, \$2015 plus \$300 for ice	___ 3-5 weeks, \$1320 plus \$150 for ice

Packages for weight training only:

Weight training session one day/week	___ 8-9 weeks, \$160	___ 3-5 weeks, \$100
Weight training session two days/week	___ 8-9 weeks, \$320	___ 3-5 weeks, \$200
Weight training session three days/week	___ 8-9 weeks, \$480	___ 3-5 weeks, \$300

Please note the following reminders:

- Training/lesson/rapid shot payments make payable to **Competitive Edge Skating, Inc.** Ice payments make payable to **KVIH.**
- On-ice lessons are scheduled in 30-60 minute increments with 5 to 8 players per 1 instructor. Players will be grouped together based on their age and skill level. Additional ice time during the day of your instruction is to be used by the players for individual practice time.
- Absolutely no refunds or make up sessions; A \$25 fee will be implemented for any returned or bounced checks.

Mail registration and ALL payments to:

Competitive Edge Skating, Inc.
38273 Remington Park
Farmington Hills, Mi 48331

Skater's Name: _____ Parent/Guardian's Names: _____
DOB: _____ Level: _____ Phone: _____ Email Address: _____
Street Address: _____ City/State: _____ Zip: _____

I, _____, parent/guardian of _____, hereby recognize that participation in the sport of hockey, ice skating, plyometric training, agility training, or weight training can be hazardous, and can result in minor or serious injury, even death. For these reasons, I hereby acknowledge that I understand the risks involved in skating and hockey, and should a medical emergency arise, I grant full authorization for medical treatment to the 911 emergency staff on call. By signing this waiver I also agree that in no way will I hold KVIH, Competitive Edge Skating Inc., Competitive Edge Training, Inc., Jennifer Matras, or any other professional instructor liable for any such injuries should they occur. I have fully read this waiver and I acknowledge a complete understanding of the contents of this waiver. Sign: _____ Date: _____