



**Ridge Meadows Flames Junior Hockey Club Inc.**  
 1400 Oxford St  
 Coquitlam BC V3E 3H9  
 Tel. No. (604) 809 – GOAL (4625)

# Group 1

**Ridge Meadows Flames Summer Preparation Camp. (Births,91,92,93,94,95)**

- Camp Sign in at lobby June 30<sup>th</sup> at 6:45pm
- Ice Sessions. June 30<sup>th</sup> July 7, 14, 21, 28 Aug 4, 11 (7:30pm to 8:45pm)
- Diet & Nutrition Seminar July 5<sup>th</sup> 6:00pm to 7:00pm (After Dryland)
- Drylands. July 5, 12, 19,26 Aug 2, 9 (All Drylands 5:00pm to 6:00pm)

**This summer camp will concentrate on skills and conditioning.(Camp will be non contact)  
 Ice Sessions as well as Drylands will be located at Planet Ice Maple Ridge.  
 Camp Instructors: Jamie Fiset, Tavis Eaton, Brad Hunt, Wayne Bess**

**\*\*Please print clearly. Thank you\*\***

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_  
 Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Phone No: \_\_\_\_\_ **E-mail:** \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Shot (Left or Right): \_\_\_\_\_

**Position (1st choice):** \_\_\_\_\_ **Position (2nd choice):** \_\_\_\_\_

Team Played for in 2010-11: \_\_\_\_\_  
 Association Division Level AAA, C

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Injuries and/or Medical Problems which the Trainer should be aware of: \_\_\_\_\_

=====

As parents of the above named player, I (please print name in full) \_\_\_\_\_, do hereby consent to said player participating in all activities at the Ridge Meadows 'Flames' Junior Hockey Club Inc. camp, and do hereby release, absolve, indemnify and save harmless the Ridge Meadow Flames Junior Hockey Club Inc., their employees, officers, coaching staff, governors, and/or volunteers from any claim(s) which may arise as a result of his/her participation. I assume all risks and hazards incidental to the Camp and do hereby waive all claims whatsoever which I or the above named player may have against the Ridge Meadows Flames Junior Hockey Club Inc. Each player is required to wear his/her CHA approved equipment from the last season played in 2010-2011.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Payment of \$295.00 In full must accompany registration.  
 \*NO REFUNDS AFTER May 31/11\*  
 Cheques payable to: Ridge Meadow 'FLAMES',  
 c/o 1400 Oxford st Coquitlam, BC V3E 3H9  
 (Camp Includes Flames Practice Jersey and T-Shirt)  
 We would ask that your E-Mail be included and correct as we will be  
 communicating via e-mail**