

# 2008 PRE TRAVEL TRY-OUT CONDITIONING CAMP

## HEAD INSTRUCTORS:

MIKE BERGER  
KEITH MILLER  
BERNIE JOHN  
TIM HUETTL  
DEVAN HEIBER

**YOU WANT TO BE READY FOR TRYOUTS?  
HERE'S YOUR CHANCE!! (4) 75 MINUTE SESSIONS OF PURE FLOW  
AND ON ICE DRILLS FOR THE PLAYERS THAT WANT TO GET  
SERIOUS ABOUT TRYOUTS. DON'T LEAVE ANY DOUBTS,  
BE READY!!!!**

## SCHEDULE

<u>TUESDAY MAY 27TH:</u>	MITE/SQUIRTS (6:30PM – 7:45PM) PEE WEE/BANTAMS (8:00PM – 9:15PM)
<u>WEDNESDAY MAY 28TH:</u>	MITE/SQUIRTS (6:40PM – 7:55PM) PEE WEE/BANTAMS (8:05PM – 9:20PM)
<u>THURSDAY MAY 29TH:</u>	MITE/SQUIRTS (6:30PM – 7:45PM) PEE WEE/BANTAMS (8:00PM – 9:15PM)
<u>FRIDAY MAY 30TH:</u>	MITE/SQUIRTS (6:30PM – 7:45PM) PEE WEE/BANTAMS (8:00PM – 9:15PM)

FRIDAY SESSIONS WILL BE CONTROLLED SCRIMMAGES FOR BOTH GROUPS  
TO GET READY FOR THE SATURDAY TRYOUTS.

**COST: \$100.00 (GOALIES \$40.00)  
SPACE LIMITED TO 35 PLAYERS AND 4 GOALIES PER AGE GROUP  
ALL SESSIONS HELD AT THE FORUM AT FISHERS**

# PRE TRAVEL TRY-OUT CONDITIONING CAMP

**PLAYERS NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**HOME PHONE**\_\_\_\_\_ **CELL PHONE**\_\_\_\_\_

**LAST LEVEL PLAYED**\_\_\_\_\_

**LEVEL DESIRED FOR PRE TRAVEL CAMP**\_\_\_\_\_

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**PAYMENT TYPES: (PLEASE FILL IN AMOUNT)**

**CASH**\_\_\_\_\_ **CHECK**\_\_\_\_\_ **CHECK #**\_\_\_\_\_

**CREDIT CARD #**\_\_\_\_\_

**EXP DATE**\_\_\_\_\_

**FOR MORE INFO CALL MIKE BERGER @ 317-849-9930 EXT 101**

Waiver and Release I waive, release, and hold harmless the Forum and Center Ice Development (the parent company) and each of their affiliated clubs and organizations, directors, officers, sponsors, employees, volunteers, agents, successors, and assign from all claims for any liability, injury, loss, or damage in any way connected with my participation in the Activity whether or not caused in whole or part by the negligence or other misconduct of any of the organizations of individuals mentioned above. I intend for this waiver and release also to apply to any relatives, personal representatives, heirs, beneficiaries, next of kin, or assigns who might pursue any legal action or claim for such liability, injury, loss, or damage

**PARENT SIGNATURE**\_\_\_\_\_ **DATE**\_\_\_\_\_

**MAIL ALL PAYMENTS TO: THE FORUM AT FISHERS  
9022 EAST 126<sup>TH</sup> STREET  
FISHERS, INDIANA 46038**