

SELECT POWER SKATING

FOR
Open to Ages 8 and up
WHEN

DATES	TIMES
Tuesday, July 23	7-8:30 PM
Wednesday, July 24	7-8:30 PM
Friday, July 26	6:30-8 PM
Tuesday, July 30	7-8:30 PM
Wednesday, July 31	8-9:30 PM
Friday, August 2	7:30-9 PM
Tuesday, August 6	6:15-7:45 PM
Wednesday, August 7	8-9:30 PM
Friday, August 9	7:30-9 PM

FEE
\$192/person
includes 13.5 HOURS OF ICE
Don't delay... Program fills fast!
Min. 10 players | Max. 30 players
Required Equipment:
Skates, helmet, gloves and stick

**REGISTRATION
STARTS JUNE 10**

Walk-in/Mail-in:
Sertich Ice Center
1705 East Pikes Peak Avenue
Colorado Springs, CO 80909

Fax: (719) 385-6063

Online: coloradosprings.gov/Sertich
Activity # 12042

QUESTIONS

Contact Pam @
(719) 385-6009 or email
Pam.Ingrassia@coloradosprings.gov

LOCATION

Sertich Ice Center
1705 East Pikes Peak Avenue

**DESIGNED TO
IMPROVE A PLAYER'S**

- FORWARD AND BACKWARD STRIDES
- TURNS
- STARTS
- CROSSOVERS
- STRIDE LENGTH AND STRENGTH

ABOUT TREVOR POCHIPINSKI

Trevor Pochipinski "Poch" hails from Prince Albert SK Canada. He played Junior Hockey for the Penticton Knights (BCHL), winning the Canadian Jr. Hockey Championship. Poch earned a hockey scholarship to Colorado College and after graduating, Trevor was drafted by the LA Kings. He played professionally for the AHL-New Haven NightHawks, the ECHL-Raleigh IceCaps, and the Wheeling Thunderbirds. Poch has been coaching over 22 years at the high school and AAA levels. During his high school tenure, he won 4 State Championships. Most recently, he was inducted into the BC Hockey Hall of Fame.

REGISTRATION FORM

Parent/Guardian _____ Email _____
 Address _____ City/Zip _____
 Primary Phone _____ Secondary Phone _____
 Payment Method Cash Check Visa Mastercard Discover American Express MO Other _____

Participant's First and Last Name	M/F	Date of Birth	Activity #	Fee	Office Use
			12042		
			12042		

- I acknowledge and accept the Health Insurance Coverage conditions**
 I fully understand that Select Power Skating does not provide accident or health insurance coverage for my son/daughter while he/she is participating in Select Power Skating. I further understand that it is my sole responsibility to provide accident insurance coverage for my child(ren). I hereby agree to defend, hold harmless, indemnify, release and forever discharge the City of Colorado Springs, Sertich Ice Center, Trevor Pochipinski, its directors, officers, agents and employees, from and against any and all claims, demands and causes of action, on account of damage to personal property or personal injury.
- I acknowledge and agree to the Participant Warning Statement**
 Although participation in supervised athletics and activities is generally considered safe, and serious injuries are not common, it is impossible to eliminate every risk. To help reduce accidents and injuries, players must obey safety rules, report all physical problems, follow a proper conditioning program and inspect their own equipment. By registering for this program, you acknowledge that you have read and understand this warning. Those who do not wish to accept the risk should not register or participate.

*The City of Colorado Springs carries no insurance for participants or spectators.
 The Emergency Medical Service will be called for all medical emergencies, and individuals will be responsible for all ensuing charges.*

INFORMATION PROVIDED BELOW WILL BE DESTROYED IMMEDIATELY AFTER REGISTRATION IS PROCESSED

Credit Card Number: _____ Exp. Date: _____ CVC Code: _____

I authorize PRCS to use my credit card for fees in the above listed activities



Print Cardholder's Name _____

Signature of Cardholder _____

