

Annual Calendar

NY Capital Region

Weekly Fundamentals Program

Saturday Thru Thursday

Year Round

All Levels Randall's Rink, Troy

December School Break

December

Albany County Hockey Facility, Colonie

Winter School Break

February

Albany County Hockey Facility, Colonie

Spring School Break

April

Albany County Hockey Facility, Colonie

Advanced Player Spring Invitational

April, May, June

Albany County Hockey Facility, Colonie

Summer Hockey Schools

Albany County Hockey Facility, Colonie

Randall's Rink Troy, NY

Vermont

Fall Pre-Season Clinic

October

Middlebury

Summer Hockey School

July

TBA

Spring Schedule

April 05 5:30 – 7:40pm Fri

April 12 5:30 – 7:40pm Fri

April 19 5:30 – 7:40pm Fri

April 26 NO ICE - CAP CUP

May 03 5:30 – 7:40pm Fri

May 10 5:30 – 7:40pm Fri

May 17 5:30 – 7:40pm Fri

May 24 5:30 – 7:40pm Fri

May 31 5:30 – 7:40pm Fri

June 07 5:30 – 7:40pm Fri

June 14 5:30 – 7:40pm Fri

June 21 5:30 – 7:40pm Fri

5:30 Skating Development

6:30 Stick/Puck & Passing

7:30 Jump Rope & Off Ice

7:45 Depart

Dave Randall's



SPRING 2024

Intermediate Level

INVITATIONAL SPRING PROGRAM

Albany County Rink

April 5th to June 21st

Friday Evenings

Skill Development

For

Intermediate Players

Full Equipment Required For All Players

" THE EXCEPTIONAL HOCKEY EXPERIENCE "

See you on the ice !

For Registration & Info Call

5 1 8 - 2 8 1 - 4 8 1 1

www.myhockeyskills.com

NORTH AMERICAN HOCKEY SYSTEMS, INC.
SPRING INTERMEDIATE PLAYER INVITATIONAL

Dates: Friday Evenings April 5th to June 21st
NO PRACTICE – April 26

Time: 5:30-7:45pm

Cost: \$525

Open To: Intermediate Players By Invitation Only

Location: Albany County Rink

Text Copy, Mail, or Email to:

N.A.H.S. Inc.
200 Oakwood Ave
Troy, New York 12182

Phone: 518 – 281 – 4811

Email: info@myhockeyskills.com



AC spring 2024 Int.

Players Name: _____ DOB: _____ Age: _____

E-Mail: _____ **Address:** _____

City: _____ State: _____ Zip: _____

Parent's Names: _____ Contact #: _____ Home Phone: _____

Father: _____

Mother: _____

Experience: _____ Current Level: _____ Years Played: _____

LIABILITY, IMAGING, AND MEDICAL RELEASE

In consideration of your permitting (Player) _____ to use the the Albany County Hockey Facility for any purpose whatsoever, I hereby covenant and agree with North American Hockey Systems, Inc., the owners, officers, agents, and employees, and all persons engaged as instructors or administrators in any programs in which he/she may be a participant, to indemnify and hold harmless, each and everyone of them from and against all claims, liability, loss cost, damage and expenses which may in any way arise out of, or in connection with, the use by him/her of such facilities, including without limitation all claims he/she might have for personal injury or property damages to him/her or so arising. I understand that all video and photo images taken are the sole property of North American Hockey Systems, Inc., and may be used in promotional and instructional media. I also give consent to administer first aid and emergency transport to nearest medical facility.

Date: _____

Signature: _____

Parent or Guardian