

Annual Calendar

NEW YORK STATE

Capital District Region

Weekly Fundamentals Program

September Thru July
Sunday Thru Friday
All Levels Randall's Rink, Troy

Pre Season Clinic

September
TBD

Christmas 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

Colonie & North Troy

Downstate Region

Spring Summer Fall
TBD

Mohawk Valley Region

Spring & Summer Hockey Schools
TBD

VERMONT

Fall Winter
Middlebury

For registration info

www.myhockeyskills.com

Email: info@myhockeyskills.com

Mini-Mite/Mite Summer Program

This program is for
players ages 5 - 9 that
have reasonable
backward skating
development and have
started basic stick/puck
control.

Class size 12 players
maximum

Full equipment
required

Any questions please
Contact

Coach Randall

518-281-4811
info@myhockeyskills.com



2026

Summer Mini Mite/Mite

***INDIVIDUAL SKILLS
DEVELOPMENT***

RANDALL'S RINK
200 Oakwood Avenue, Troy, NY

July 13 - 17

Aug 17 - 21

**Hockey Skills
For
Younger Players**

"THE EXCEPTIONAL HOCKEY EXPERIENCE"

www.myhockeyskills.com

See you on the ice!

SUMMER MINI-MITE/MITE CAMP 2026
NORTH AMERICAN HOCKEY SYSTEMS, INC.

Dates: Check week(s) of choice
() July 13 - July 17 (Mon – Fri)
() Aug 17 - Aug 21 (Mon – Fri)

Location: *Randall's Rink 200 Oakwood Avenue Troy NY*

Fee: \$305 per week

Time: 10am – 12noon 1st hr Skating 2nd hr Stick/Puck

TO REGISTER:

TEXT COPY FORM TO 518-281-4811 OR MAIL TO ADDRESS BELOW

PAYMENT: USE QR CODE OR [\(CLICK HERE\)](#) FOR CARD PAYMENT

TO PAY BY CHECK USE ADDRESS BELOW



NAHS, INC.
200 OAKWOOD AVE
TROY, NY 12182

Phone: 518 - 281 - 4811

info@myhockeyskills.com

FAX: 518 - 308 - 0280

Oak Mini-Mite Camp 2026

Name: _____ DOB: _____ Age: _____

EMAIL: _____ Address: _____

City: _____ State: _____ Zip: _____

Parent's Names: _____ Cell/Day Phones: _____ Home Phone: _____

Father: _____

Mother: _____

Experience: Current Level: _____ Years Played: _____

LIABILITY, IMAGING, AND MEDICAL RELEASE

In consideration of your permitting (PLAYER) _____ to use RANDALL's Training Rink, Troy NY, for any purpose whatsoever. I hereby covenant and agree with North American Hockey Systems, Inc., the owners, officers, agents, 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