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# Mark Weaver's C.O.D.E. Camp



**“Crack the C.O.D.E. to better hockey.”**  
Creativity. Originality. Decisiveness. Experience.

## July 13th - July 17th, 2009

**1 hour and 10 minutes of ice per session!**

**\*Goalie Instructor\***

**\*Mite - Bantam Levels\***

**\*Limited Enrollment\***

**C.O.D.E.'s mission is to provide an on-ice environment that promotes creativity, improves decision making skills, and develops a players individual and team skills by the use of small area games.**

**Mark Weaver: "My goal is to increase a player's hockey sense, creativity, and overall skill so that each player will flourish in his or her hockey experience."**

- ✓ **Player's will participate in decision making drills. These drills are NOT pre-defined, meaning they have to READ and REACT to their environment.**
- ✓ **Drills are tailored to creating an overall experience as a hockey player, both mentally and physically.**
- ✓ **Skating drills will help develop better skating techniques.**
- ✓ **Player's will play high tempo 2 v 2 and 3 v 3 games to increase their overall stamina.**
- ✓ **Player's will run through continuous cycles of skating for 45 seconds and resting for 45 seconds, simulating a shift during a game.**

#### **Goalies**

**There will be a goalie instructor to work with the goalies each session, followed by a barrage of shots.**

**Group I DOB 99' & Younger 5:50pm-7:00pm**

**Group II DOB 96' 97' 98' 7:10pm-8:20pm**

#### **CAMP TUITION**

**\$185 per skater \$80 per goalie**

**\*\*The C.O.D.E. camp will only accept 28 skaters and 6 goalies per group.\*\***

## **SUMMER 2009 MARK WEAVER'S C.O.D.E. CAMP APPLICATION FORM AND WAIVER**

PLAYER'S NAME: \_\_\_\_\_

PARENT/ GUARDIAN NAME(S): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

GROUP 1 2 JERSEY YS/M YL/XL S M L XL

LAST TEAM PLAYED FOR: \_\_\_\_\_

#### **EMERGENCY INFORMATION**

EMERGENCY CONTACT: \_\_\_\_\_

RELATIONSHIP WITH CONTACT: \_\_\_\_\_

EMERGENCY PHONE: \_\_\_\_\_

ANY ADDITIONAL INFO: \_\_\_\_\_

#### **WAIVER & RELEASE**

The undersigned parent expressly understands and agrees that Skylands Ice World (SIW) shall in no way be responsible, or in any way be liable, for any injury, claim for damages, pain and/or suffering, or any liability whatsoever arising out of a player's use of, or presence at, SIW at any time. Parent acknowledges that all activities offered at SIW, including those incidental in nature, contain inherent elements of risk which the parent fully accepts and agrees to bear the full burden of. It is the intention of the player and/or parent to forever waive and release SIW from any claims of any kind whatsoever, in law or in equity, on account of any injury or other damages of any kind, including but not limited to loss of personal property while on SIW premises, or while coming to or from SIW. Player and/or parent hereby also grants to SIW the right to use any photographic or video images taken of player while at SIW for use for SIW for advertising and/or promotional and marketing purposes.

PARENT/ GUARDIAN SIGNATURE \_\_\_\_\_