

# NMYHA

North Metro Youth Hockey Association

www.nmyha.pucksystems.com

## 2019 NMYHA Fall Hockey Skills Training

### MITES, SQUIRTS, PEEWEES, BANTAMS AND GOALIES

NMYHA coaches have prepared an advanced Fall hockey training program for NMYHA players to get them ready for the upcoming try-outs and season. The program will have top NMYHA coaches introducing advanced training methods to get players to the next level and give them an edge for the upcoming season. Please register for the level you will be playing in the 2018-19 season.

**Maximum of 6 goalies per skater age group level; must pre-register.**

All sessions will be conducted at the Brooklyn Park Ice Arenas. Sponsored by Brooklyn Park Recreation and Parks Department and the North Metro Youth Hockey Association.



**MITES 1/2 ..... \$72 .....#152001.71**  
 September 9 .....6:00-7:00 PM ..... Rink 1  
 September 16 .....5:30-6:30 PM ..... Rink 1  
 September 24 .....5:45-6:45 PM ..... Rink 1  
 September 30 ..... 5:15-6:15 PM ..... Rink 1  
 October 11 .....6:45-7:45 PM ..... Rink 1  
 October 18 .....6:45-7:45 PM ..... Rink 1

**MITES 3/SQUIRTS ...\$72 ..... #152001.72**  
**GOALIE..... FREE ..... #152001.74**  
 September 3 .....7:15-8:15 PM ..... Rink 1  
 September 8 .....6:00-7:00 PM ..... Rink 1  
 September 10 .....6:15-7:15 PM ..... Rink 2  
 September 15 .....5:15-6:15 PM ..... Rink 1  
 September 18 .....5:30-6:30 PM ..... Rink 2  
 September 23 .....5:15-6:15 PM ..... Rink 1

**PEEWEE/BANTAM ... \$72 ..... #152001.73**  
**GOALIE..... FREE ..... #152001.75**  
 September 8 .....4:45-5:45 PM ..... Rink 1  
 September 11 .....8:00-9:00 PM ..... Rink 1  
 September 15 .....4:00-5:00 PM ..... Rink 1  
 September 16 .....6:45-7:45 PM ..... Rink 1  
 September 17 .....5:30-6:30 PM ..... Rink 1  
 September 18 .....8:15-9:15 PM ..... Rink 2



**Fill out registration form completely and return to:  
 BROOKLYN PARK RECREATION & PARKS 5600 85th Avenue N, Brooklyn Park, MN 55443 763-493-8333**

Parent/ Guardian Name \_\_\_\_\_ Email \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home/Cell Phone ( ) \_\_\_\_\_ Work/Cell Phone ( ) \_\_\_\_\_

Do participants have any disability, allergy or special need? \_\_\_\_\_

Do participants need special accommodations to participate? \_\_\_\_\_

| Participant's name | Sex (circle) | Birthdate | Category | Program Number | Time  | Fee   |
|--------------------|--------------|-----------|----------|----------------|-------|-------|
| _____              | M / F        | _____     | _____    | _____          | _____ | _____ |
| _____              | M / F        | _____     | _____    | _____          | _____ | _____ |
| _____              | M / F        | _____     | _____    | _____          | _____ | _____ |
| _____              | M / F        | _____     | _____    | _____          | _____ | _____ |

PLEASE CHECK IF ADDRESS CHANGED SINCE YOU LAST REGISTERED      Empl. Initials: \_\_\_\_\_ Date: \_\_\_\_\_      TOTAL: \_\_\_\_\_

NOTICE: Information requested on this form is classified as either "public" or "private" pursuant to the Minnesota Government Data Practice Act. The information is requested so the registration process can be completed and persons can be notified for updated program information. You are not legally required to provide this information. The consequences of not providing the information may be rejection of the registration or inability to make notification of program or scheduling changes to you. Private data will only be used by the City staff and others officially connected with the program for the purposes of administering the activity. Private data cannot be released to the public without your consent.

**Payment — CASH OR CHECK:**

Cash: **Bring to the ZW address below**  
 Check # \_\_\_\_\_  
 Mail checks (payable to):  
**City of Brooklyn Park**, Recreation and Parks, 5600 85th Avenue N, Brooklyn Park, MN 55443

**Payment — CREDIT CARD:**

*Credit card payments cannot be processed by mail or fax*  
 Call: I will pay by calling: 763-493-8333  
 Online: I will register online at:  
[www.brooklynpark.org/registration](http://www.brooklynpark.org/registration)  
 In person: I will bring payment to 5600 85th Avenue N, Brooklyn Park, MN 55443