

# SELECT POWER Skating

IMPROVES A PLAYER'S FORWARD AND BACKWARD STRIDING, TURNING, STARTS, CROSSOVERS, STRIDE LENGTH, AND STRENGTH

## FOR

Open to Ages 8 and up

## WHEN

DATES	TIMES
Monday, March 21	7:15-8:45 PM
Tuesday, March 22	6:45-8:15 PM
Wednesday, March 23	8:30-10 PM
Thursday, March 24	7:45-9:15 PM
Monday, March 28	7:15-8:45 PM
Tuesday, March 29	6:45-8:15 PM
Thursday, March 31	7:45-9:15 PM
Monday, April 11	7:45-9:15 PM
Tuesday, April 12	7:45-9:15 PM
Wednesday, April 13	7:15-8:45 PM

## LOCATION

Sertich Ice Center

## LED BY TREVOR POCHIPINSKI

Trevor Pochipinski hails from Prince Albert SK Canada. He played Junior Hockey for the Penticton Knights (BCHL) where his team won the Canadian Jr. Hockey Championship. "Poch" then earned a scholarship to play hockey for Colorado College. After graduating, "Poch" was drafted by the LA Kings and played professionally for the AHL-New Haven NightHawks, the ECHL-Raleigh IceCaps, and the Wheeling Thunderbirds. "Poch" has been coaching for over 20 years at the high school and AAA levels. During his high school tenure, he won 4 State Championships. Most recently, "Poch" was inducted into the BC Hockey Hall of Fame.

## FEE

\$220/person  
includes 15 hours of on-ice activity  
Minimum 10 players | Maximum 25 players  
Required Equipment: Skates, helmet and gloves

## REGISTRATION STARTS

March 1 until spaces fill

### Walk-in/Mail-in:

Sertich Ice Center  
1705 East Pikes Peak Avenue  
Colorado Springs, CO 80909

Fax: (719) 385-6063

Online: coloradosprings.gov/Sertich

## QUESTIONS?

Contact Pam at (719) 385-6009 or email [pingrassia@springsgov.com](mailto:pingrassia@springsgov.com)

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
			7446		
			7446		

**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 PR&CS to use my credit card for fees in the above listed activities

Print Cardholder's Name

Signature of Cardholder



parks · recreation · cultural services  
SERTICH ICE CENTER

REGISTRATION FORM