



CAMBRIDGE
Speed Skating Club

ONTARIO
SPEED SKATING
ASSOCIATION



OSSA SUMMER CAMP

Friday August 05, Saturday August 06 and Sunday August 07, 2011

The Cambridge Speed Skating Club is excited to host this Development Summer Camp, incorporating the LTPAD program on the 100m track. The coaches have prepared a program designed to give you a head start for this coming season.

Location: Hespeler Memorial Arena, 640 Ellis road West, Cambridge ON N1R 5W8

This training camp is open to the first 60 skaters who apply and meet the below criteria. Skaters will be divided into 2 groups of 30.

Skaters invited to apply:

Male skaters: 500m. time below 1 min.05 sec. or minimum age of 11 at the time of the camp with one year speed skating experience

Female skaters: 500m. time below 1 min.10 sec. or minimum age of 10 at the time of the camp with one year speed skating experience

Deadline: Application and payment have to be received by **June 01, 2011.**

Confirmations will be sent out via email no later than June 08, 2011.

Camp fee: \$140.00

Camp registration: Friday August 05, 2011. 3.30 – 4.30 pm. Hespeler Memorial Arena

Camp administrator: Mariska Vergeer (mariska@cambridgespeedskating.ca tel.519-696-3190)

Please mail registration and payment to:

Cambridge Speed Skating club: c/o Mariska Vergeer

18 Meadow Rose Lane, R.R.#1 Ayr, ON N0B 1E0

Accommodations:

Holiday Inn: 2 nights \$206.00 plus tax (519-658-4601)

Hilton Homewood Suites: 2 nights \$258.00 plus tax (519-651-2888)

There is also an opportunity for billeting, please indicate on your registration.

Coaches: Blake Morrison (Program Coordinator)

Paula McConvey, Ernie Overland, Cindy Overland

Program:

Friday : 4.30 – 7.30 pm. 1½ hour ice, 1½ hour dryland

Saturday : 7.00 – 10.00 am. 1½ hour ice, 1½ hour dryland

10.30 am. Baseline Concussion Assessment (Standard Assessment Concussions)
(Balance Error Scoring System)

5.00 – 8.00 pm. 1½ hour ice, 1½ hour dryland

Sunday : 7.00 – 10.00 am. 1½ hour ice, 1½ hour dryland

10.00 am. Skaters and parents are invited to a brunch with the coaches.

In the gallery of the Hespeler Arena

4.00 – 7.00 pm. 1½ dryland , 1½ ice (relays)



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REGISTRATION FORM

Name: _____ SSC no: _____

Club: _____ Age group: _____

Date of Birth: Day _____ Month _____ Year _____ 500m. time: _____

Telephone: _____ Email: _____

Address: _____ City: _____

Postal Code: _____ Medical condition: _____

Emergency contact information:

Name: _____ cell no. _____

Billeting Request: Yes No

Mandatory Equipment: In accordance with SSC Regulation D3-100, all competitors must wear hard shell helmets, bib-style neck protectors, cut and water resistant gloves or mitts, knee pads, shin guards, shatter-resistant protective sport-glasses or a complete visor held in place by an elastic strap, and cut resistant clothing are required for this competition. The back corners of skate blades must be rounded off.

Waiver: By signing this entry form, I hereby, for myself, my heirs, executors, administrators and assigns, waive and release any and all rights and claims for damages I may have against the City of Cambridge, SSC, OSSA, the Cambridge Speed Skating Club, their agents, officers, or members for any and all injuries suffered by me at said training camp to be held on August 05, 06 and 07, 2011 at Cambridge, Ontario.

I give permission for my child to take part in the Baseline Assessment testing. The Cambridge Speed Skating Club will provide my child with the test result data and will not keep any data collected on file (except from Cambridge Speed Skating Club members).

Signature of Participant : _____

Signature of Parent or Guardian if participant is under 18

In witness whereof, I have here unto set my signature and seal this _____ day of _____ 2011

This information is collected under the authority of the Freedom of Information and Protections of Privacy Act. It is required to register you in the camp Names/Images of participants may be published on boards, websites, media, newsletters and promotional material. Alternative contact and medical information will only be used in a medical emergency. If you have any questions about the collection of or use of this information, contact the Camp administrator at 519-696-3190.