

# HIGH ALTITUDE ELITE GIRLS HOCKEY CAMP

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**DATE:** JUNE 20<sup>TH</sup> – 24<sup>TH</sup>, 2009  
**LOCATION:** UNIVERSITY OF COLORADO AT BOULDER  
**COST:** \$875.00 - INCLUDES ROOM, BOARD, JERSEY, CAMP T-SHIRT & AIRPORT GROUND TRANSPORTATION  
**DEADLINE:** MAY 1<sup>ST</sup> ONLINE AT [WWW.ELITEGIRLSHOCKEYCAMP.COM](http://WWW.ELITEGIRLSHOCKEYCAMP.COM) OR BY MAIL.

**OPEN TO ALL PLAYERS ENTERING GRADES 10-12 IN FALL 2009 AND 2009 GRADUATING SENIORS.**

This camp, fashioned to emulate the college hockey experience, was designed by **Marnie Hill**, former Associate Head Coach, Providence College:

- Exceptionally intense dry land training & evaluation at high altitude
- Powerful, challenging on-ice instruction
- Specialized offensive & defensive tactics
- Competitive multi-team camp tournament
- Team building & sports psychology concepts

## **2009 Staff For High Altitude Elite Camp will Include:**

<b>Paul Nemetz-Carlson</b>	Yale
<b>Kristin Steele</b>	Connecticut College
<b>Grant Kimball</b>	University of North Dakota
<b>Allison Coomey</b>	Boston University
<b>Phoebe Manchester</b>	Chatham University
<b>Assistant Coach</b>	University of Wisconsin
<b>Melanie Ruzzi</b>	Harvard University
<b>Marnie Hill</b>	Former Assoc. Head Coach Providence College
<b>Zach Blom</b>	Strength and conditioning coach/DU Pioneer

## **Goalie Instructor**

**Bob Bellemore** – Former goalie - Providence College; former goalie coach - New Jersey Devils; Current Goalie coach - Men's and Women's Ice Hockey teams at Providence College.

**COME TRAIN AT MILE-HIGH IN THE ROCKY MOUNTAINS AND EXPERIENCE HIGH ALTITUDE HOCKEY!** PLAYERS MUST BE IN GREAT physical shape before coming to this camp. You have not had a work-out until you experience it at a mile high! If you are looking for a college prep camp, then do not miss this opportunity!

**This camp is NOT for those who are looking for a recreational camp. The number of participants is limited so register early. Contact [info@elitegirlshockeycamp.com](mailto:info@elitegirlshockeycamp.com) for more information.**

Please refrain from making travel plans until you have received confirmation that you have been accepted to the camp. We reserve the right to cancel the camp if minimum participation is not met. In the event of cancellation, registration fees will be refunded.

# Application for Camp Enrollment

## CAMP FEES/PAYMENTS (WE WILL NOT ACCEPT APPLICATIONS WITHOUT PAYMENT):

- Tuition: \$875.00 - includes lodging, breakfast, lunch, dinner, jersey, camp t-shirt and airport ground transportation
- Accepted payment methods: check, VISA, AMEX or MASTERCARD
- If paying by check, please make payable to: "CSGHA". You may pay the full amount, or send 2 checks: one for \$500.00 and another post dated for May 1st, 2009 in the amount of \$375.00. Your first check will be deposited upon receipt and the second will be deposited on May 1<sup>st</sup>, 2009.
- Players are accepted on a first come, first serve basis, and applications are approved based on age requirements listed on application. If the application is not accepted, any amounts paid will be returned/refunded.
- Refund Policy: NO REFUNDS after being accepted to the camp!

### Player Information [complete all fields]:

Name of Player: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Street Address: \_\_\_\_\_ School Grade: ('08/'09) \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_ **Player Cell Phone** \_\_\_\_\_  
2008/2009 Team: \_\_\_\_\_ Preferred Position: \_\_\_\_\_ Shoots: \_\_\_\_\_  
Coach's Name and Phone: \_\_\_\_\_  
USA Hockey/Canadian National Camps Attended \_\_\_\_\_ Camps Attended \_\_\_\_\_  
District Camps Attended (include city) \_\_\_\_\_  
Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Jersey size: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_  
How did you hear about the Camp? \_\_\_\_\_

### Parent Information [complete all fields]:

Name(s) of Parent/Legal Guardian: \_\_\_\_\_  
Address of Parents (if different than player): \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Insurance Carrier Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Policy Number: \_\_\_\_\_  
In case of emergency (other than parent) name/phone: \_\_\_\_\_  
Airport Pick up Yes \_\_\_ No \_\_\_ Airport Drop off Yes \_\_\_ No \_\_\_

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If paying with personal check, please make checks payable to **CSGHA**.

If paying with credit card (Master Card, AMEX, Discover, and Visa Only), the total amount will be charged. Please complete the following:

\_\_\_\_\_ Expires \_\_\_/\_\_\_/\_\_\_ **Type of Card (circle):** **Visa**  
**MasterCard Discover Amex**

Name on Card: \_\_\_\_\_  
Billing Address: \_\_\_\_\_

**I authorize my bank to process the applicable High Altitude Elite Girls Hockey Camp Fee on the charge card indicated above by the CSGHA. When my credit card company charges my account, such charge constitutes my receipt for payment. Should said credit card company not honor any charge, it is understood that the payment is to be made by me in the amount of said payment plus a service charge. I UNDERSTAND AND AGREE THAT ALL FEES ARE NON-REFUNDABLE.**

Card Signature \_\_\_\_\_

Return this form and deposit to: CSGHA: High Altitude Girls Hockey Camp PO Box 270196 Littleton, CO 80127-0003