

# 2017 BERTAGNA SUMMER GOALIE HOCKEY SCHOOL APPLICATION



NAME \_\_\_\_\_ AGE (as of 7/1/17) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONES: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell \_\_\_\_\_ NAME of EMERGENCY CONTACT \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ YEARS PLAYING HOCKEY \_\_\_\_\_ YEARS AS A GOALIE \_\_\_\_\_

HAVE YOU ATTENDED A BERTAGNA SCHOOL BEFORE? Yes \_\_\_\_\_ No \_\_\_\_\_ Number of of Years \_\_\_\_\_

LEVEL of HOCKEY PLAYED IN 2016-17 (Bantam, HS. etc.) \_\_\_\_\_

## GOALIE WEEKS

*ALL TIMES LISTED BELOW ARE ACTUAL ON-ICE TIMES*

**July 10-13 MARLBORO (\$330, NESC)**  
**SPECIAL 4-DAY, REDUCED RATE SCHOOL**  
**(Co-Directed With Mike Geragosian)**

Marlboro Goalie 12:00 noon-2:00 pm \_\_\_\_\_

**July 31-Aug. 4 BURLINGTON (\$360, Ice Palace)**

Burlington Goalie 1:00-3:00 pm \_\_\_\_\_

**August 14-18 BEVERLY (\$360, Raymond Bourque Arena at Endicott College)**

Beverly Goalie 4:00-5:50 pm \_\_\_\_\_

**Once/Week NORTH ANDOVER (Wed. at Microlce)**

No. Andover Goalie 6:00-7:00 pm \_\_\_\_\_

See below for details.

## GOALIE "Once-A-Week" SUMMER CLINICS: Wednesday Nights in Small Groups

**Wednesday "Microlce" Small Group Sessions: \$60/session for four or more sessions; \$70 for individual session**  
**NORTH ANDOVER, MA (Microlce Center)**

**Weekly Small Group — July 5, 12, 19, 26; August 2, 9, 16, 23 — 6:00-6:50 pm \_\_\_\_\_ (No Session on 8/30/16)**

(Four or more sessions: \$60 per session; "walk-ons": \$70 per session; scheduling can be flexible)

Send application with:

• \$150 deposit for 4-day or 5-day goalie clinics • weekly small-ice sessions pay in full: Bertagna Goaltending, 7 Concord Street in Gloucester, MA 01930

Refer all questions to E-Mail, jbertagna@comcast.net.; Fax, (781) 245-2492.

"I enroll my child/self in Joe Bertagna's Hockey School, aware of the inherent risks involved in playing ice hockey. I attest that the applicant is in good health and capable of participating in a rigorous athletic program. I voluntarily recognize, accept and assume the risks involved and release Joe Bertagna, the rinks, and coaches involved. In the event of injury, I give permission for those in charge to seek medical attention."

ADULT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_