

## Specialized Training Offered In The Following Areas

### **POWER SKATING**

Edge work  
Stride  
Agility  
Speed  
Balance

### **SKILLS**

Stick handling  
Passing  
Shooting/Deflections  
Breakaways

### **EXPERIENCED PERSONNEL**

Joe Zizza & Staff



POWER EDGE HOCKEY

19 DAVIS LANE

READING, MA 01867



# Power Edge

## Hockey Skills Clinic signup

[www.poweredgehockey.com](http://www.poweredgehockey.com)

**POWER SKATING / SKILL CLINICS**

Power Edge Hockey Clinic provides instruction in the fundamentals of hockey, with a special emphasis on skating.

The beginner player to the highly skilled player, Power Edge Hockey School will develop and improve hockey skills for young players. Players will enjoy and excel at playing the fastest game on earth! Our philosophy is based on the idea that skating technique is first and foremost. Our goal is for each player to master the proper technique. Each skating drill is to develop a specific aspect of correct skating technique. Each player is individually supervised. As drills are executed, players receive immediate coaching where correction is necessary. Skills are taught and refined through specific drills and practices. We work to develop strength and improve weakness. We at **Power Edge Hockey School** strive to develop young hockey players to their fullest potential while maintaining their motivation. We create a **positive, enthusiastic, and fun** arena directed toward instilling a long lasting desire to play hockey.

**The Greatest Game on Earth!!!**

## Power Skating / Skill Clinics

Please see all clinics offered at [www.poweredgehockey.com](http://www.poweredgehockey.com)  
Select The Clinics Tab.

[poweredgehockey.com](http://poweredgehockey.com)  
781-315-2057



## Registration Form

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City / Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Session # \_\_\_\_\_

### LIMITED ENROLLMENT

#### Select Your

Location: \_\_\_\_\_  
Cost: \_\_\_\_\_

Walk-ons if space available

*Make check payable to:*

**POWER EDGE HOCKEY**

**19 DAVIS LANE, READING, MA 01867**

**Waiver:** I the undersigned understand that neither Power Edge Hockey and/or anyone associated with this institutions, will assume any responsibility for accidents, medical expense and or dental expenses incurred as a result of participation in this program. Furthermore I recognize that my son/daughter must wear all USA Hockey approved safety equipment, including mouthpiece. The applicant is in good health and is able to participate in vigorous physical activity that may include physical collisions.

Signature \_\_\_\_\_

Date: \_\_\_\_\_