



Dakota Hockey Experience

Huron, SD

July 20 – 24 & July 27 – 31

July 20 – 24

Girls (\$200) 12:00 - 1:15 On Ice
3:00 - 4:15 On Ice

Pee Wee (\$200) 1:30 - 2:45 On Ice
4:30 - 5:45 On Ice

July 27 - 31

Varsity (\$200) 7:30 - 8:45 On Ice
10:30 - 11:45 On Ice

Squirt (\$75) 9:00 - 10:15 On Ice

Mite (\$75) 1:45 - 3:00 On Ice

Bantam (\$200) 12:15 - 1:30 On Ice
3:15 - 4:30 On Ice

Limited Space: 28 skaters + 4 goalies per level.

A \$50 deposit is required. The balance is due by July 9, 2009.

Return form with deposit check payable to:
Dakota Hockey Experience
PO Box 770
Huron SD 57350

Sioux Falls Stampede head coach, Kevin Hartzell will lead the coaching staff.

Kevin Hartzell is in his fourth season as Head Coach and General Manager of the Stampede. In his two seasons with the Herd, Hartzell has led the Stampede to their first ever Anderson Cup Championship (05-06) and Clark Cup Championship (06-07). Hartzell, in his ninth season as a USHL head coach, ranks third overall amongst USHL head coaches in winning percentage (.691) and is second overall amongst USHL active coaches.

Hartzell grew up in St. Paul where he played high school sports, eventually playing in the USHL (1976-78) and the University of Minnesota (1978-82). He played for Team USA in the World Junior Tournament in 1978. At the U of M, he played for legendary head coach Herb Brooks and was a part of a NCAA championship.

Age Guidelines

Boys Varsity	01/01/90 - 06/30/94	Pee Wee	07/01/96 - 06/30/98
Girls	01/01/90 - 12/31/98	Squirt	07/01/98 - 06/30/00
Bantam	07/01/94 - 06/30/96	Mite	07/01/00 - 06/30/02

There will be NO CASH REFUNDS given for any reason other than unforeseen circumstances.



Contact Doug Duxbury (dadux@yahoo.com) or Mike Wever (mwever@huronsd.com) for information.



Dakota Hockey Experience - Huron, SD - July 20 – 24 & July 27 – 31, 2009

Player Name: _____ Parent Name: _____

Address: _____ City: _____

Phone: _____ Parent Email: _____

Date of Birth: _____

Level: ___ Mite ___ Squirt ___ Girls ___ Bantam ___ Boys Varsity ___ Pee Wee

Position: ___ Skater ___ Goalie Jersey Size: ___ S ___ M ___ L ___ XL ___ XXL

Return form with deposit check payable to: Dakota Hockey Experience - PO Box 770 - Huron SD 57350

Release and Waiver of Liability and Indemnity Agreement (Read Carefully Before Signing)

1. The parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating in the DAKOTA HOCKEY EXPERIENCE activity or event, he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agreed that, if at any time, I feel anything to be UNSAFE; I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.
2. I/WE fully understands and acknowledges that:
 - There are risks and dangers associated with participation in HOCKEY events and activities, which could result in bodily injury partial and/or total disability, paralysis and death.
 - The social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe. These risks and dangers may be caused by the action, inaction or negligence of the participant or the action, inaction or negligence of others, including, but not limited to, the Releases named below.
 - There may be other risks not known or are not reasonably foreseeable at his time.
3. I/WE accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Releases named below.
4. I/WE HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the facility used by the participant, including its owners, managers, promoters, lessees of premises used to conduct the event or program, premises and event inspectors, underwriters, consultants and others who give recommendations, directions, or instructions to engage in risk evaluation or loss control activities regarding the facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purposes herein referred to as "Releasee"...FROM ALL LIABILITY TO THE UNDERSIGNED, my/our personal representatives, assigns, executors, heirs and next to kin FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES AND ANY CLAIMS OR DEMANDS THEREFORE ON ACCOUNT OF ANY INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OR DAMAGE TO PROPERTY, ARISING OUT OF OR RELATING TO THE EVENT(S) CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE.
5. I/WE HEREBY acknowledge that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
6. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.
7. On behalf of the participant and individually, the undersigned partner(s) and/or legal guardian(s) for the minor participant execute this Waiver and Release. If, despite this release, the participant makes a claim against any of the Releases, the parent(s) and/or legal guardian(s) will reimburse the Releasee for any money, which they have paid to the participant, or on his behalf, and hold them harmless.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Event DAKOTA HOCKEY EXPERIENCE HOCKEY CAMP

Parent or Guardian Signature (if minor) _____

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