

## Hatfield Ice Programs

- Group Skating Lessons
- Hockey Skating Lessons
- Private Lessons
- Learn to Play Hockey
- Kindergarten Hockey League
- Youth & Adult Skill Clinics
- Goalie Clinics
- Fall & Spring Youth Hockey Leagues
- Fall & Spring Adult Hockey Leagues
- Spring School Hockey League
- Figure Skating Hours - Year Round
- Public Events - Year Round



## Cancellation & Credit Policy

NO REFUNDS OR CREDITS  
WILL BE ISSUED FOR THIS  
HATFIELD ICE PROGRAM



Come Play in Our World!

Hatfield Ice  
350 County Line Rd.  
Colmar, PA 18915  
215-997-9797  
www.hatfieldice.com

Hatfield Ice  
Presents  
**The K.H.L.**  
KINDERGARTEN HOCKEY  
LEAGUE  
2023 - 2024



**Cross Ice Beginner  
Ice Hockey for Ages 4 – 6**

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# Instructor

## Chris Orlando:

- ◆ USA Hockey Level 5 Master Coach
- ◆ Hatfield Ice Hockey Director
- ◆ Genesis Hockey Club Head Coach
- ◆ West Chester University Ice Hockey Team
- ◆ Nichols College Ice Hockey Team

# Dates / Times & Cost

## Thursdays

### FALL Session

October 5th - December 14th, 2023

### WINTER Session

January 11th - March 14th, 2024

### SPRING Session

March 21st - May 23rd, 2024

### SUMMER Session\*

May 30th - June 27th, 2024

**Times:** AM Session: 9:00 - 10:00am

PM Session: 3:00 - 4:00pm

**Cost:** \$175.00 Per Player

\*Summer Session \$95.00 Per Player

# About the K.H.L

- Affordable beginner Hockey for players ages 4 - 6
- 10 Classes: Thursdays 9:00 - 10:00am or 3:00 - 4 :00 pm
- Summer Session – 5 Classes
- Jersey included for 1st sign up.
- Practices with Coach Chris
- Once a week scrimmage
- End of Session Party

# Player Requirements

Players should have learned the basics of skating before entering this program. We recommend that players pass the Snowplow 3 skating level or better in our Group Lesson Program.

Players must be approved by Chris Orlando before signing up for this program.

Please contact Chris for more details:

215-997-9797, Ext. 104

# Equipment

FULL EQUIPMENT IS REQUIRED FOR ALL PLAYERS. RENTAL EQUIPMENT FOR PLAYERS AGES 8 & UNDER IS AVAILABLE, BUT LIMITED.

CONTACT CHRIS ORLANDO

FOR MORE DETAILS: 215-997-9797, Ext 104

# 2023 - 2024 Kindergarten Hockey

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

School District: \_\_\_\_\_

Any Medical Problems: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Group Lesson Level: \_\_\_\_\_

### **SESSION – Please circle one**

FALL:            AM            PM

WINTER:        AM            PM

SPRING:        AM            PM

SUMMER:        AM            PM

### **MEDICAL RELEASE FORM**

I hereby authorize Hatfield Ice to make any and all decisions regarding the emergency treatment (based upon recommendation of a licensed physician)

**Name:** \_\_\_\_\_

And sign the necessary hospital form in order to obtain prompt release. In case of an emergency, I can be reached at the following phone number:

**Make Checks payable to: HATFIELD ICE  
Credit Card payments can only be made with a  
VISA or MASTERCARD, in person, at  
Hatfield Ice.**

In consideration of the participant being permitted to register and participate in this Hockey League at Hatfield Ice, we do hereby forever release and discharge its Directors, Agents, Employees and person or corporation or partnership connected here with from all manner of action, injury, damage, claims, or demands which will, shall or may hereafter have, suffer or receive by reason of such participation in any program at Hatfield Ice. This release shall be binding on our heirs, assigns, executors and administrators. It is further agreed that Hatfield Ice shall not be considered to guarantee or warrant such equipment as may be used in conducting said programs.

**All applications require participant or parents signature.**

Signature

Date

\_\_\_\_\_