



HIGH SCHOOL & 15U

SUMMER

2021

LIGHTNING TRAINING

June 15th – August 17th

- **On-Ice Skill Development**
- **Edgework Power Skating**
w/ Coach Shermoen
- **Center Off-ice Strength**
- **Lightning Summer Tournament**

\$210.00

On & Off-Ice Sessions
Payable to Lightning Booster Club (LBC)

Lightning Summer Tourney
July 16th–18th

Hockey-Specific Strength Sessions

June –

- Tuesday 15th 9:00-9:50am
- Tuesday 22nd 9:00-9:50am
- Tuesday 29th 9:00-9:50am

July –

- Tuesday 6th 9:00-9:50am
- Tuesday 13th 9:00-9:50am
- Tuesday 20th 9:00-9:50am
- Tuesday 27th 9:00-9:50am

August –

- Tuesday 3rd 9:00-9:50am
- Tuesday 10th 9:00-9:50am
- Tuesday 17th 9:00-9:50am



Center
Fitness

Ice Schedule

JUNE – Hodgins-Berardo Arena

- Tuesday **June 15** — 6:30-7:40pm
- Thursday **June 17** — 7:00-8:00am (Pwr Skt)
- Friday **June 18** — 3:30-4:30

- Tuesday **June 22** — 6:30-7:40pm
- Thursday **June 24** — 7:00-8:00am (Pwr Skt)
- Friday **June 25** — 3:30-4:30

JULY – IRA Civic Center

- Monday **July 12** — 11:50-12:50pm
- Tuesday **July 13** — 6:50-7:50am (Pwr Skt)
- Thursday **July 15** — 11:50-12:50pm

- Monday **July 19** — 11:50-12:50pm
- Tuesday **July 20** — 6:50-7:50am (Pwr Skt)
- Thursday **July 22** — 11:50-12:50pm

- Monday **July 26** — 11:50-12:50pm
- Tuesday **July 27** — 6:50-7:50am (Pwr Skt)
- Thursday **July 29** — 11:50-12:50pm

AUGUST – IRA Civic Center

- Monday **August 2** — 11:50-12:50pm
- Tuesday **August 3** — 7:30-8:20am (Pwr Skt)
- Thursday **August 5** — 11:50-12:50pm
- Tuesday **August 10** — 7:30-8:20am (Pwr Skt)



Visit the Lightning online:

www.grglighting.com

twitter.com/grglighting

facebook.com/grglighting

Player Name: _____

Address: _____

Parent Phone #: _____

Emergency Contact #: _____

Medical Insurance Co: _____

Policy #: _____

Physician Name: _____

Phone #: _____

**RELEASE OF LIABILITY: I understand that participation and/ or observation of the sport of hockey constitutes a risk of serious injury, including permanent paralysis or death. I have read this waiver and knowingly recognize, accept, and assume the mentioned risk. I release all personnel of any liability for claims, accidents, injuries or losses resulting from participation in the Lightning Booster Club sponsored hockey training.*

parent/ guardian signature: _____

date: _____

Contact:
Brad Hyduke 218-213-6338
bhyduke@isd318.org

**COMPLETE WAIVER AND MAKE CHECK TO LIGHTNING BOOSTER CLUB (LBC), MAIL TO:
35634 Johnson Lane Cohasset, MN 55721**