



DR. KEARNEY MIDDLE SCHOOL

10723 – 92 Street, Fort St. John, B.C. V1J 3J4

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Hockey Academy Application 2020/2021

Dear Parents/Guardians & Student-Athletes:

Dr. Kearney Middle School's Hockey Academy is currently accepting applications for the 2020-2021 school year. Our skills-based program provides students the opportunity to develop their basic hockey skills through on and off ice instruction. As part of our program the students spend two to three afternoons per week from September to March on the ice developing skating, puck handling and shooting skills. When the ice is no longer available we work on off ice fitness training. Our program is meant to be a supplementary hockey program to help further develop players' individual skills and understanding of the game of hockey. Students will play on their regular minor hockey team. **Our program is not an elite hockey program.**

Who is eligible?

- Grade 8 and 9 students
- All skill level of players

Selection:

- Interested students must complete the application and return it to the school office by no later than **Wednesday May 29th, 2020. We will accept emailed applications as long as they are signed by both the student and a parent/guardian.**
- A selection process may take place involving an interview, if necessary. We will then select applicants, who have been interviewed, using a random draw. (This process will only take place if we have too many applications for the available spots.)

Other:

- All players are responsible for providing their own hockey equipment.
- Students may be removed from the program if they are not meeting the academic and behavioral expectations of the school.
- **There is a fee of \$300 for our program.** This is used to cover the costs of our academy. Students will receive approximately 50 ice sessions. All funds will be collected after students have been selected.
- If any player is unable to afford the program fee they can apply for a bursary to cover part of their enrollment. To apply, contact Mr. Steele.
- Students will receive two elective credits for this course.

All interested applicants must complete an application and return it to Dr. Kearney Middle School by May 29th, 2020. If you have any questions feel free to contact Tim Louie or Ray Taggart at the school or email tlouie@prn.bc.ca or rtaggart@prn.bc.ca



Dr. Kearney Middle School Hockey Academy Application Form

Note: Due to the unpredictability of the COVID-19 pandemic, the program may be adjusted to meet public health requirements and to comply with other necessary precautions.

Date: _____

Students Legal Name: _____

Birthdate (MM/DD/YEAR): _____

BC CareCard Number: _____

Address: _____

Postal Code: _____

School Attended in 2019-2020: _____

What grade will you enter in September 2020: _____

Parent/Guardian Contact Information:

Name: _____ Relationship: _____

Address if different: _____

Home Phone Number: _____ Cell: _____

Email: _____

Emergency contact (REQUIRED):

Name: _____ Phone Number: _____

By signing below you are acknowledged that being part of Dr. Kearney Hockey Academy is a privilege.

You _____ (the student) will follow all the academic and behavioral expectations set out by the school.

You _____ (the parent) give your child permission to leave school grounds as needed to participate in the Hockey Academy. You are also giving your child permission to be part of the Hockey Academy and accept all the responsibilities and risks that go along with participating in the program.

Parent Signature

Student Signature

Date