



LOS ANGELES JR. KINGS

Proudly presents our 8TH Annual Weekly

TUNE-UP CLINICS

STARTING Wednesday, APRIL 29, 2009

see details below for age divisions, dates and times

@ Toyota Sports Center, El Segundo, CA



The Tune-up Clinics will run for 8 consecutive weeks featuring a series of four special high intensity clinics of skills and scrimmages designed by Tomas Kapusta and Jack Bowkus.

All clinics will be conducted by the
2009 – 2010 Los Angeles Jr. Kings' Coaching Staff

- These Clinics are open to ALL serious Hockey players and goalies including first year travel hockey players who want to improve their game.

No Pre-Registration necessary!
Cost is \$ 30.00 per clinic session!

- You can also purchase the entire 8-week package for \$210, a savings of \$30. Submit your form and payment payable to the LA Jr. Kings by April 28th or on the first day of the clinic.

Be advised that there is a No Refund Policy.

Mites (2001, 2002) & Squirts (99, 2000): Wednesdays @ 6:45 PM

Peewees (97, 98) & Bantams (95, 96): Wednesdays @ 8:00 PM

Midgets (91, 92, 93, 94): Wednesdays @ 8:00 PM

- For more details regarding our Tune-Up clinics please visit our website at www.lajrkings.com



Skaters will be accepted on clinic day on a space available basis only! Make sure to arrive early on clinic nights to secure your spot!

For more information Please contact Rosemary Voulelikas at
dimivoul@pacbell.net

**Times subject to change Check our website often



LOS ANGELES JR KINGS PRE-SEASON TUNE-UP CLINICS REGISTRATION

(PLEASE PRINT -- FILL OUT COMPLETELY)

2009 PRE-SEASON TUNE-UP CLINICS

This is a one-time registration form. All registrants will be screened for 2008-2009 USA Hockey membership and the SCAHA league wide Delinquency List. Applicants may purchase the entire 8-week Tune-Up Clinic package for \$210, savings of \$30 (A ONE-TIME OFFER) by April 28th or on the first day of the clinics only to guarantee their spot.

PLAYER NAME: _____ POSITION _____

DATE OF BIRTH: _____ HOW MANY YEARS PLAYING? _____

LAST SEASON CLUB: _____ DIVISION & LEVEL _____
(BCL, Ice Dogs, etc.) (e.g. Mite A/B, etc.)

PARENT(S) NAME: _____ HOME TEL. # _____
WORK TEL# _____

ADDRESS: _____

CITY/STATE/ZIP: _____

EMAIL ADDRESS: _____

EMERGENCY CONTACT _____ PHONE/CELL _____

FOR OFFICE USE ONLY

USA	Y	N	CHECK#/CASH
DEL	Y	N	CHECK#/CASH
DATE	AMT/CHECK#		CASH

**FOR THE ONE TIME OFFER OF ENTIRE 8-WEEK TUNE-UP PACKAGE
MAIL FORM AND PAYMENT OF \$210 PAYABLE TO THE LA JR. KINGS**

TO BE RECEIVED NO LATER THAN APRIL 28, 2009

**TO: LA Jr. Kings
C/o: Rosemary Voulelikas
425 Washington St.
El Segundo, CA 90245**