

## Spring 2025 Schedule

Mar 31 8:45 - 10:15pm AC Rink  
April 07 8:45 - 10:15pm AC Rink  
April 14 8:45 - 10:15pm AC Rink  
April 21 NO Skate - Capitol Cup  
April 28 8:45 - 10:15pm AC Rink  
May 05 8:45 - 10:15pm AC Rink  
May 12 8:45 - 10:15pm AC Rink  
May 19 8:45 - 10:15pm AC Rink  
May 26 NO Skate - Memorial Day  
June 02 8:45 - 10:15pm AC Rink  
June 09 8:45 - 10:15pm AC Rink  
June 16 8:45 - 10:15pm AC Rink

### *Instructors*

*Dave Randall*  
*Ryan Secor*  
*Paul Dowdell*

Any Questions & Info Call

*Phone: 518 - 281 - 4811*

*email: info@myhockeyskills.com*



## SPRING 2025

### ADULT

### INDIVIDUAL SKILLS PROGRAM

Skating, Puck Control,  
Passing, Shooting,  
Game Situation

Albany County Rink

March 31 thru June 16

Monday Evenings

Adult Players

Full Equipment Required For All Players

*" THE EXCEPTIONAL HOCKEY EXPERIENCE "*

See you on the ice !

[www.myhockeyskills.com](http://www.myhockeyskills.com)

# NORTH AMERICAN HOCKEY SYSTEMS, INC.

## Adult Spring Skills Program

**Dates:**           **March 31 - June 16** (Mon Eves)  
                          **No Practice 4/21 or 5/26**

**Location:**       **Albany County Hockey Facility**

**Times:**           **8:45 – 10:15pm**

**Fee:**             **\$ 425 10 weeks**  
                          **\$ 50 for single class when/if available**

TEXT COPY FORM TO 518-281-4811 OR MAIL TO ADDRESS BELOW  
PAYMENT: USE QR CODE OR [\(CLICK HERE\)](#) FOR CARD PAYMENT  
TO PAY BY CHECK USE ADDRESS BELOW



**N.A.H.S. Inc.**  
**200 Oakwood Ave.**  
**Troy, New York 12182**

**Phone: 518-281-4811**

**email: [info@myhockeyskills.com](mailto:info@myhockeyskills.com)**

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

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

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

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

Current Level: \_\_\_\_\_ Years Played: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Phone # 1: \_\_\_\_\_ Phone # 2: \_\_\_\_\_

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

### LIABILITY, IMAGING, AND MEDICAL RELEASE

In consideration of your permitting me to use the Albany County Hockey Facility Rink, for any purpose whatsoever, I hereby covenant and agree with North American Hockey Systems, Inc., the owners, officers, agents, and employees, and all persons engaged as instructors or administrators in any programs in which he/she may be a participant, to indemnify and hold harmless, each and everyone of them from and against all claims, liability, loss cost, damage and expenses which may in any way arise out of, or in connection with, the use by him/her of such facilities, including without limitation all claims he/she might have for personal injury or property damages to him/her or so arising. I understand that all video and photo images taken are the sole property of North American Hockey Systems, Inc., and may be used in promotional and instructional media. I also give consent to administer first aid and emergency transport to nearest medical facility.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_