

## ***Annual Calendar***

### ***NEW YORK STATE***

#### **Capital District Region**

##### **Weekly Fundamentals Program**

September Thru July  
Sunday Thru Friday  
All Levels Randall's Rink, Troy

##### **Pre Season Clinic**

September  
TBD

##### **Christmas School Break**

December  
Albany County Hockey Facility, Colonie

##### **Winter School Break**

February  
Albany County Hockey Facility, Colonie

##### **Spring School Break**

April  
Albany County Hockey Facility, Colonie

##### **Advanced Player Spring Invitational**

April, May, June  
Albany County Hockey Facility, Colonie

##### **Summer Hockey Schools**

Colonie & North Troy

#### **Downstate Region**

Spring Summer Fall  
TBD

#### **Mohawk Valley Region**

Spring & Summer Hockey Schools  
TBD

### ***VERMONT***

Fall Winter  
Middlebury

***For registration info***

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

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

## ***Mini-Mite/Mite Summer Program***

This program is for  
players ages 5 - 9 that  
have reasonable  
backward skating  
development and have  
started basic stick/puck  
control.

Class size 12 players  
maximum

Full equipment  
required

Any questions please  
Contact

Coach Randall

518-281-4811  
[info@myhockeyskills.com](mailto:info@myhockeyskills.com)



***2025***

**Summer Mini Mite/Mite**

***INDIVIDUAL SKILLS  
DEVELOPMENT***

***RANDALL'S RINK***  
***200 Oakwood Avenue, Troy, NY***

***July 14 - 18***

***Aug 11 - 15***

**Hockey Skills  
For  
Younger Players**

***"THE EXCEPTIONAL HOCKEY EXPERIENCE"***

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

***See you on the ice!***

**SUMMER MINI-MITE/MITE CAMP 2025**  
**NORTH AMERICAN HOCKEY SYSTEMS, INC.**

**Dates:** Check week(s) of choice  
( ) July 14 - July 18 (Mon – Fri)  
( ) Aug 11 - Aug 15 (Mon – Fri)

**Location:** *Randall's Rink 200 Oakwood Avenue Troy NY*

**Fee:** \$295 per week

**Time:** 10am – 12noon 1<sup>st</sup> hr Skating 2<sup>nd</sup> hr Stick/Puck

**TO REGISTER:**

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



NAHS, INC.  
200 OAKWOOD AVE  
TROY, NY 12182

**Phone:** 518 - 281 - 4811

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

**FAX:** 518 - 308 - 0280

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***Oak Mini-Mite Camp 2025***

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

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

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

Parent's Names: \_\_\_\_\_ Cell/Day Phones: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Father: \_\_\_\_\_

Mother: \_\_\_\_\_

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

**LIABILITY, IMAGING, AND MEDICAL RELEASE**

In consideration of your permitting (PLAYER) \_\_\_\_\_ to use RANDALL's Training Rink, Troy NY, for any purpose whatsoever. I hereby covenant and agree with North American Hockey Systems, Inc., the owners, officers, agents, 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:** \_\_\_\_\_

Parent or Guardian