

Lee Valley Lions Junior Ice Hockey Club



Beginners Program
Learn to Play (LTP)



Beginners Program - Learn to Play (LTP)

Lee Valley Junior Ice Hockey Club has a comprehensive training process to ensure that all players are competent on the ice before they begin to compete in matches.

The program starts with the 'new to ice hockey' young person attending our Beginners Program (also known as Learn to play (LTP)).

LTP training takes place on two evenings per week;

Tuesdays 7.15pm - 8.15pm

Fridays 7.15pm - 8.15pm.

Each session of the course lasts 16 lessons (approx 8 weeks).

The LTP sessions are broken down into three levels with each level building on the skills developed in the preceding level.

At the end of the sixteen lesson term the Head Coach will assess the players and move them to the next level if appropriate.

To qualify to be able to progress to the next level the student must be present for the assessment which is carried out during lessons 15 and/or 16.

At the end of each level the student will receive a certificate of achievement.

Once a student reaches level 3 they *may* be invited to train alongside one of the clubs teams. This is totally dependant on the coaches assessment of each individual players ability.

Timings

All players must be on the bench in relevant kit by 7.15pm at the latest.

Equipment/Kit (full list of equipment/kit shown on page 3)

Lee Valley Junior Ice Hockey Club will supply basic equipment/kit if required. There is an expectation that students/players obtain their own equipment/kit as soon as possible.

Kit supplied by Lee Valley Junior Ice Hockey Club will be retained at the club in a numbered bag. In the unlikely event of non attendance for three weeks without contact from yourselves, your child's kit will be redistributed.

It is strongly advised that you acquire (as your own) the following equipment/kit as soon as possible;

- Skates
- Helmet
- Stick
- Protective cup/Jock
- Neck guard



Lee Valley Junior Ice Hockey Club sells some selected kit on a second hand basis. Please ask at the kit room for what is available.

Lee Valley Junior Ice Hockey Club do not supply protective cups/jocks or neck guards
New kit can be purchased from the suppliers list on page 4.

Costs

The first week (lesson 1 & 2) are free, after which the training costs £90 per 16 lessons.

We accept payment by;

Bacs

Cheque - made payable to 'Lee Valley Junior Ice Hockey Club' (LVJIHC)

Cash

Bank account details for the club are as follows for making direct transfers;

Bank: HSBC

Account Name: LVJIHC

Account No: 51144405

Sort Code: 40-06-27

Documentation

Prior to your child's first training session the following documentation MUST be completed and given to the course administrator.

1. Membership Form
2. Medical Consent Form
3. EIHA Master Registration Form (U9's only)
4. Equipment/kit loan form

Please see pages 5 - 8 for down-loadable forms

Lee Valley Junior Ice Hockey Club takes great care to ensure your child has a fun and safe time while on the ice. Please note that all participants do so at their own risk.



NEWTOHOCKEY.COM

FULL EQUIPMENT CHECKLIST FOR KIDS



HELMET

MOUTH GUARD

NECKGUARD

PRACTICE JERSEY

SHOULDER PADS

ELBOW PADS

JOCK

GLOVES

HOCKEY STICKS

HOCKEY PANTS

SHIN PADS

HOCKEY SOCKS

SKATES

HOCKEY BAG

READ THE DESCRIPTION FOR MORE DETAILS ABOUT EACH PIECE OF EQUIPMENT



Equipment Suppliers

SKATE ATTACK

397 Green Lanes
Palmers Green
London
N13 4JG
Tel - 0208 886 7979
sales@skateattack.com

HOCKEY OFFICE

Gb.hockeyoffice.com

THE SKATE HUT

Skatehut.co.uk

HOCKEY MONKEY

www.hockeymonkey.com

MONKEY SPORTS

www.monkeysports.com



Lee Valley Lions Junior Ice Hockey Club Membership Form

All members of the Lee Valley Junior Ice Hockey Club are required to complete this Membership Form and return it with payment for the first term to the club registration secretary. All details will be kept in a secure confidential database with access restricted to authorised club officials only.

PLAYER	
First Name:	
Surname:	
Date of Birth:	
Gender:	
Primary Parent / Guardian Contact Details	
Name:	
Mobile:	
E-Mail:	
2 nd Parent / Guardian Contact Details	
Name:	
Mobile:	
E-Mail:	
Address	
House No / Name:	
Street:	
Town:	
County:	
Post Code:	

THE ENGLISH ICE HOCKEY ASSOCIATION LTD
MASTER REGISTRATION FORM **2019/2020**
PLAYER'S UNDER THE AGE OF 18 YEARS

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ALL BOXES MUST BE FILLED IN USING BLACK INK – PLEASE USE BLOCK CAPITALS

NATIONALITY: IMPORTANT:
Please indicate if dual national:
COUNTRY OF BIRTH: IMPORTANT

LAST CLUB: IMPORTANT

COUNTRY LAST PLAYED IN – IMPORTANT

Family Name:

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Forename(s):

--

Date of birth:

--

Sex:

--

Address:

Tel No:

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I hereby consent for applies to any future club player may transfers to. I undertake that he/she will observe the Rules, Regulations and Bylaws of the EIHA, IHUK and the IIHF and affiliated bodies and to observe the codes of conduct with whichever club he/she may be registered with. I understand that the information on this form will be held on a computer and is subject to the Data Protection Act. Information about my child may be added to a list so that my child can be contacted by the EIHA.

Signature of player's parent/guardian Date:

Signature of club official **CLUB:**

FULL NAME OF CLUB REQUIRED (No initials)



Lee Valley Lions Junior Ice Hockey Club Medical Consent Form

To be completed by: Parent / Guardian of all U9 – U18 players

Player First Name		Player Surname	
Date of Birth	/ /	Hockey Age Group (circle)	U9 U11 U13 U15 U18
Doctors Name and Surgery		Doctors Phone No	
Emergency Contact Details	Name _____ Relationship to child: _____ Telephone _____		
Give details of any medical condition. (e.g Asthma, epilepsy etc) If none mark N/A		Give details of any allergies. If none mark N/A	
Do you take any medication? If none mark N/A		Have you had any head or neck injuries in past 2yrs? If none mark N/A	
Are you up to date with your tetanus injection?	Yes / No Date: _____	Any other information the coaches should be aware of?	

I agree to my son / daughter participating in sporting and other recreational activities organised by the Lee Valley Lions Junior Ice Hockey Club during their time as members of the club.

I authorise an official from Lee Valley Lions Junior Ice Hockey Club to agree to emergency treatment of any injury or illness of my child if qualified medical personnel consider treatment necessary and perform treatment. This authorisation is granted only if I cannot be reached and a reasonable effort has been made to do so. (this is a necessary precaution . If you do not accompany your child to training or games, treatment may be delayed without parental consent)

My child and I are aware that participating in ice hockey is a potentially dangerous sport. I assume all risks associated with participation in this sport, including but not limited to falls, contact with other participants and other reasonable risk conditions associated with the sport. All such risks to my child are known and understood by me.

I understand this consent form and agree to its conditions on behalf of my child.

Parent / Guardian Name: _____

Parent / Guardian Signature: _____ Date: _____

Lee Valley Junior Ice Hockey Club

Equipment Loan Form

Name	
Contact No	Bag No



Helmet	
Shoulder Pads	
Elbow Pads	
Gloves	
Shorts	
Leg Pads/Shin Protectors	
Skates	
Shirt	
Socks	
Other	

Sign;
Print;
Date;