



Buffalo Speedskating Club

44 Park Avenue
Holland, NY 14080
716-553-7661

info@buffalospeedskating.org
www.buffalospeedskating.org

2015 Buffalo Junior Summer Training Camp

August 24 - 29, 2015

For Competitive Junior Skaters

Ages 12 to 21



Take Your Skating & Training To The Next Level!

Join us for an intensive 6 day clinic coached by Eastern Regional Camps Director Tom Miller. Coach Miller brings his technique driven training program to Western New York for our annual camp.

The camp is designed for competitive Junior skaters, ages 12 to 21. It incorporates, Ice, Dryland and analyses. Additional training will be provided in the art/sciences of sharpening and blade setup, race preparation and injury prevention.

- **Sponsored by:** The Buffalo Speed Skating Club.
- **Instructed by:** Eastern Regional Camps Director Tom Miller, and assisted by BSC coach Craig Pielechowski. Additional coaching and supervision will be provided by members of the Buffalo Speedskating Club, and guest coaches.
- **Location:** The Northtown Center at Amherst - 1615 Amherst Manor Drive Amherst, NY 14221
- **Dates:** Monday, August 24 - Saturday August 29.
- **Total Ice Time:** 15 hours (on an Olympic size rink). **Total Dryland Training:** 11 hours.
- **Accommodations:** If desired, out of area skaters will be assigned a host family to stay with during the camp at no additional cost. Host families will provide transportation to and from the rink, breakfast and a pack lunch. Suggestions for area hotels will also be provided.
- **Registration:** The camp will be limited to the first 25 applicants. We expect it to fill quickly, so send in your registration early to insure your participation. The **single skater fee is \$350 USD**. The **Family discount fee is \$300 USD per skater after the first skater in the same family**. Payment for past participants with pre-registration is due on June 1, 2015. New skaters must send in payment with their registration.
- **After you register:** An information/confirmation packet will be emailed to you detailing what you should bring along with additional information about the camp and Western New York. Your host family information, (if applicable) will be provided approximately one week prior to the camp.

For questions, please phone Alan Jay at 716-553-7661 or email info@buffalospeedskating.org/.



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2015 Buffalo Junior Summer Training Camp Itinerary August 24 - 29, 2015

Rink: The Northtown Center at Amherst - 1615 Amherst Manor Drive Williamsville, NY 14221

- All training activities will take place at the Northtown Center or at The University at Buffalo (UB).
- Meals: **Breakfast:** Athletes are expected to have eaten breakfast before arriving at the Center.
Lunch: A pack lunch should be brought to the rink. (host families will provide a pack lunch)
Dinner: Athletes will be escorted across the street to the University at Buffalo Student Union where there are a number of restaurants, (unless previous arrangements are made). The cost of dinner is the responsibility of the skater.
Snacks: Healthy snacks and drinks will be provided throughout the day.

Schedule:

Monday August, 24th

8:00am - 8:30am - Check in
8:30am - 9:00am - Introductions/Orientation
9:00am - 10:00am - Warm Up
10:00am - 11:30am - Ice
12:00pm - 1:00pm - Lunch
1:00pm - 2:00pm - Dryland (large group)
2:00pm - 2:30pm - Break
2:30pm - 3:30pm - Dryland (individual & small group)
4:00pm - 5:30pm - Dinner
5:30pm - 6:00pm - Warm up
6:00pm - 6:45pm - Ice (large group)
6:45pm - 7:30pm - Ice (individual & small group)

Tuesday August, 25th

9:00am - 10:00am - Warm Up
10:00am - 11:30am - Ice
12:00pm - 1:00pm - Lunch
1:00pm - 2:00pm - Dryland (large group)
2:00pm - 2:30pm - Break
2:30pm - 3:30pm - Dryland (Individual & small group)
4:00pm - 5:30pm - Dinner
5:30pm - 6:00pm - Warm up
6:00pm - 6:45pm - Ice (large group)
6:45pm - 7:30pm - Ice (individual & small group)

Wednesday August, 26th

9:00am - 10:00am - Warm Up
10:00am - 11:30am - Ice
12:00pm - 1:00pm - Lunch
1:00pm - 2:00pm - Dryland (large group)
2:00pm - 2:30pm - Break
2:30pm - 3:30pm - Dryland (individual & small group)
4:00pm - LASERTRON (optional)

Thursday August, 27th

9:00am - 10:00am - Warm Up
10:00am - 10:45am - Ice (individual & small group)
10:45am - 11:30am - Ice (large group)
12:00pm - 1:00pm - Lunch
1:00pm - 2:00pm - Dryland (large group)
2:00pm - 2:30pm - Break
2:30pm - 3:30pm - Dryland (individual & small group)
4:00pm - 5:30pm - Dinner
5:30pm - 6:00pm - Warm up
6:00pm - 6:45pm - Ice (individual & small group)
6:45pm - 7:30pm - Ice (large group)

Friday August, 28th

9:00am - 10:00am - Warm Up
10:00am - 10:45am - Ice (individual & small group)
10:45am - 11:30am - Ice (large group)
12:00pm - 1:00pm - Lunch
1:00pm - 2:00pm - Dryland (large group)
2:00pm - 2:30pm - Break
2:30pm - 3:30pm - Dryland (individual & small group)
4:00pm - 5:30pm - Dinner
5:30pm - 6:00pm - Warm up
6:00pm - 6:45pm - Ice (individual & small group)
6:45pm - 7:30pm - Ice (large group)

Saturday August, 29th

9:00am - 10:00am - Warm Up
10:00am - 10:45am - Ice (individual & small group)
10:45am - 11:30am - Ice (large group)
11:30am - 12:30pm - Traditional End of Camp Suicide Dryland
12:30pm - Picnic Lunch (family, friends, hosts families and club members are invited).

Itinerary subject to change



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Coach Biography's

Tom Miller - Head Coach



Tom developed and directs the highly successful and popular Eastern Regional Camps program at the United States Olympic Training Center in Lake Placid, New York: www.easternregionalcamps.com/.

Having grown up skating with clubs in Western New York, this is a home coming of sorts, as he brings his technique driven training program back to our region.

Tom considers himself fortunate to have worked with National Team coaches Pat Wentland and Wilma Boonstra. As well as National and Olympic coaches Jereon Otter and Susan Ellis. Tom continues to work

with Susan Ellis and bases his technique driven program on coach Ellis's theory of proper skating.

Tom has worn many hats in his storied Speedskating career. In addition to competing at both the regional and National levels, he was the Chief Competitor steward for the Jr. World Short Tracks in Warsaw, Poland; the World Short Tracks in Seoul, South Korea and the World Short Tracks in Montreal, Canada. He has also been the Meet Director for multiple National Long Track and Short Track Championships including the North American Championships, Olympic Trials, World Championships, 2000 Winter Goodwill Games and the Empire State Winter Games.

Craig Pielechowski - Assistant Coach

Craig is Head Coach for the Buffalo Speedskating Club, where he instructs both their Ice and Dryland Programs. He also skates with and is a member of the Rochester Speedskating Team.

Craig is a two time National Champion in the 60 - 69 year age group and an International Champion in the 70 - 74 year age group.





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2015 Buffalo Junior Summer Training Camp **LASERTRON** Information & Sign up



On Wednesday, the camp ends at 4:00pm following Dryland. The optional activity for the evening is LASERTRON.



2014 Camp skaters at Lasertron

Details:

- 4:00pm - transportation to LASERTRON from the rink. Skaters will be driven to LASERTRON by camp staff.
- 5:00pm - 6:00pm - Laser Tag
- 6:00pm - 7:00pm All you can eat pizza, wing and soft drink buffet. Arcade games.
- 7:00pm - 7:30pm - Skaters are to be picked up by their families or hosts.



Cost:

\$35.00 USD - Includes Laser Tag, dinner buffet and a \$10.00 arcade game card.



LASERTRON - 5101 N Bailey Ave, Amherst, NY 14226 (716) 833-8766

Wednesday, August 26th LASERTRON Sign up:

Please return this portion with your payment. It can be included along with your camp registration forms and payment, or brought separately to the camp check in.

This is an optional activity. If you will be making other evening arrangements please inform us at the camp check in.

Name: _____

Payment: \$35.00 USD - included in my camp registration (Total \$385.00 single skater)
(Total \$335.00 family discount skater)
 \$35.00 USD - paid separately



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For Competitive Junior Skaters - Ages 12 to 21

Name: _____ Date of Birth: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone: _____ Email: _____

US Speed Skating/Speed Skate Canada number: _____ Expiration date: _____

Male or Female (please circle) 500 M time: _____ or 400 M time: _____

Emergency Contact: _____ Phone: _____

I would like to stay with a host family: Yes or No (please circle)

(If yes, please fill out the Host Family Request Form)

Tech T-Shirt size: Youth S M L Adult S M L XL (please circle) Note: The shirts run large. You may want to order one size smaller than you normally wear.

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____
(if under 18 years of age)

To Register please return: Please make checks payable to the "Buffalo Speedskating Club"

- Registration form
- Waiver
- Skating Goal questionnaire
- Medical Authorization (if under 18)
- LASERTRON form and payment (if applicable)
- Host Family Request form (if applicable)
- Payment of: \$350.00 USD for single skaters or \$385.00 if you include the optional LASERTRON payment

**Please Note: Cancellation
refunds will only be issued if
your reservation can be filled.**

**Family discount: For each additional skater in the same family
\$300.00 or \$335.00 if you include the optional LASERTRON
payment .**

- I am a past skater and will defer my payment until June 1, 2015.

Your Check is Welcome!

If your check is returned for non-sufficient funds, you expressly authorize your account to be electronically debited or bank drafted for the amount of the check plus any applicable fees. The use of a check for payment is your acknowledgement and acceptance of this policy and its terms and conditions.

CHECKVELOCITY

800.430.2370 / www.checkvelocity.com



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My Skating Goal for 2015 - 2016

What is your goal for this year? This month? This decade? Do you want to make a World Team? Get PB Times? Make the National Training Program? Improve on your own Self being? Whatever you're most important personal goal might be, wishing won't make it so. You'll need to work to achieve it. Complete the statements below to figure out how.

My ultimate skating goal is: _____

My most realistic goal is: _____

I want to achieve that goal most because: _____

Some things I need to do to achieve that goal are: _____

Name: _____ Date: _____



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Waiver

Please Note: This form must be Read and Signed before the participant is permitted to attend the 2015 Buffalo Junior Summer Training Camp. By signing the agreement, the participant affirms having read this waiver.

I acknowledge that, as in all sports and exercise, there is an element of risk and that I am physically and medically capable of participating in skating activities. In consideration of the acceptance of my application and permission to participate in the 2015 Buffalo Junior Summer Training Camp, and in any of the Buffalo Speed Skating Club events, activities, or training sessions.

I myself, my heirs, executors, administrators, successors, and assigns RELEASE, WAIVE and FOREVER DISCHARGE the Buffalo Speed Skating Club, Northern New York Skating Association, It's organizers and coaches, US Speedskating, The Northtown Center, Town of Amherst, Tom Miller and all other associations, sanctioning bodies and sponsoring companies, and all their respective agents, officials, servants, contractors, representatives, and assigns of and from all claims, demands, damage costs, expense, actions, and causes of action, OF ANY KIND WHATSOEVER, whether in law or equity, in respect of death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise by reason of my participation in any event organized by the Club, whether as a spectator, participant, competitor, or otherwise, whether prior to, during or subsequent to the event and notwithstanding the same may have been contributed to or by negligence of any of the aforesaid.

I further undertake to skate safely and wear protective equipment at all times. All skaters must wear an ANSI/SNELL certified helmet, cut resistant neck guard, knee pads, safety glasses and full fingered gloves.

I have read this waiver in its entirety, and fully understand its contents. Date: _____

Name: (please print) _____ Signature: _____

Name: (please print) _____ Signature: _____
(Parent or guardian if participant is a minor)



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2015 Buffalo Junior Summer Training Camp Authorization For Minor's Medical Treatment

Child

Full Legal Name: _____ Date of Birth: _____

Doctor's Information

Doctor's Name: _____

Doctor's Address: _____ Phone: _____

Medical Insurer/Health Plan: _____ Policy #: _____

Allergies: _____

Please note conditions for which the child is receiving treatment or any other significant medical information:

Parent/Legal Guardian

Name: _____

Address: _____ Phone: _____

AUTHORIZATION AND CONSENT OF PARENT OR LEGAL GUARDIAN

I do hereby solemnly swear that I have legal custody of the aforementioned minor child. I grant my authorization and consent for any Supervising Adult to administer general first aid treatment for any minor injuries or illnesses experienced by the minor. If the injury or illness is life threatening or in need of emergency treatment, I authorize the Supervising Adult to summon any and all professional emergency personnel to attend, transport, and treat the participant and to issue consent for any X-ray, anesthetic, blood transfusion, medication, or other medical diagnosis, treatment, or hospital care deemed advisable by, and to be rendered under the general supervision of, any licensed physician, surgeon, dentist, hospital, or other medical professional or institution duly licensed to practice.

It is understood that this authorization is given in advance of any such medical treatment, but is given to provide authority and power on the part of the Supervising Adult in the exercise of his or her best judgment upon the advice of any such medical or emergency personnel.

This authorization is in effect from August 23 through August 30, 2015



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2015 Buffalo Junior Summer Training Camp Host Family Request

Name: _____ Date of Birth: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone: _____ Email: _____

Male or Female (please circle) Age: _____

Contact information: (If participant is a minor)

Parent/Guardian Name: _____ Relationship: _____

Phone: _____ Email: _____

Home Life Preferences:

Allergic to Pets: Yes No (please circle). If yes, what types: _____

Food Allergies/Aversions: Yes No (please circle). If yes, what foods: _____

Medical conditions/concerns, and any medications that you will bring along: _____

Do you request to stay with a particular host family or with another camp participant?

Yes No (please circle). Please note that we will do our best to fulfill your request, but it can not be guaranteed..

Host Family _____ Skater you would like to stay with _____

Other requests/information you would like to share with us: _____

Please Note:

You will be contacted with your host family's information approximately one week prior to the camp. It will be your responsibility to contact your host family to discuss your participants stay.