

## **Kids 3 on 3 Challenge**

*Back for our 7th  
summer the Ham  
Arena will offer a  
3on3 league for all  
ages.*

***Fun Fun Fun !!!***

*4 separate programs*

*To accommodate all  
ages and maximize the  
FUN FACTOR !*

*Call Darrell Umlah @  
447-5888*

# **First Come First Served Sessions begin June 28th**

50% deposit due by June 1



**Ham Arena Hockey Operations**

POX Box 276  
Conway NH  
03818

Phone: 603 447-5888  
Fax: 603 447-5888  
Email: [skatemail@hamarena.com](mailto:skatemail@hamarena.com)



**Summer 2010  
3 on 3  
Hockey  
For all ages**



**Beginning  
June 28th**

**Ham Arena Hockey  
Operations**

**603 447-5888**

**3 on 3  
Ages 6—12  
Full Ice!**

**Groups will be broken down by age first;**

**Mites (7 & under)**

**Mondays @ 5:00 PM.**

**Squirts (8, 9 & 10 years)**

**Wednesdays 5:00 & 6:10 PM**

**Pee Wees and Bantams (11,12 & 13)**

**Mondays @ 6:00 PM**

**All Games are full ice and are 60 minute running time.**

The summer 3 on 3 program begins the week of Monday June 28th and runs 7 consecutive weeks through August the cost for our 7 week program is only \$119.00 per player!

**Price will include a Jersey**

**Call Darrell Umlah @ 447-5888 for more details.**

**3 on 3  
Ages 14 & up  
Full ice !!**

**14 and up**

**Games will be played on Tuesday nights  
@ 8:10 and 9:20 PM.**



**Change on the fly.**

**No offsides**

**50 minute running Game time and 10 minute warm up**

This summer program begins Tuesday June 29th and runs 7 consecutive weeks. The cost for this 7 week program is only \$139.00 per player.

**Price will include a Jersey**

**Call Darrell Umlah @ 447-5888**

**for more details.**

### Player/Team application

Sign up for:	Date	Price
<input type="checkbox"/> Individual player 7 & under	6/28/10	<b>\$119.00</b>
<input type="checkbox"/> Individual player 8, 9 & 10 years old	6/30/10	<b>\$119.00</b>
<input type="checkbox"/> Individual player 11, 12 & 13 years	6/28/10	<b>\$119.00</b>
<input type="checkbox"/> Individual player 14 & up	6/29/10	<b>\$139.00</b>

**Teams must conform to the age brackets  
Please include Players age with Payment**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

Method of Payment

Check

Visa

MasterCard

\_\_\_\_\_  
Credit Card #

\_\_\_\_\_  
Exp. date

\_\_\_\_\_  
Signature



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