# HARTLAND, WI



PO Box 1011

West Falmouth, MA 02574 VM: 855-HKY-CAMP

FAX: 888-880-2604

Email: info@proambitions.com

### Welcome to the 2024 Pro Ambitions Hockey Summer Hartland, WI Boarding Camp Experience!

We hope your hockey season has been a healthy and successful one. We are really looking forward to this upcoming Summer camp season, to seeing the smiles on your child's face and watching the development in their skills and game.

Please keep this letter in a safe place, as it includes valuable instructions about the camp you registered for, as well as answers to most of your questions about the camp.

The following are a few items you will need to make your camp experience smooth and successful.

- **1.** Boarding Camp Drop off and Pick up Info- Make sure to take notice of the drop off and pick up times for your child's boarding camp.
- **2. Packing List-** Make sure to take notice of the packing list for your child's boarding camp.
- **3. Nutritional and Dietary Restrictions-** Let us know if your child has any specific nutritional and/ or dietary restrictions or guidelines.
- **4. Roommate Request-** Make sure to fill out the roommate request, if your child is planning to stay with a specific camper.
- **5. Signed Waiver of Liability-** Make sure to fill out and sign the liability waiver. Pro Ambitions Hockey, Inc. must have a signed copy of the Liability Waiver on file before a player can go on the ice. **NO EXCEPTIONS!**





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Dear Parents and Campers,

Welcome to Pro Ambitions Hockey, Inc. 2024! Below is additional information that you will need to know for the Pro Ambitions Hockey Boarding Camp programs...

#### HARTLAND, WI BOARDING CAMP

**Boarding Camp Check-In-** Please make sure to check the date, time and location of your child's board camp check-in as some locations the check in day and times may varies from week to week.

**Boarding Camp Check-out and pick up-** Also please make sure to check the check-out/ pick up time at your child's camp. Please make sure to take into consideration afternoon traffic when leaving to pick up your child at the end of camp.

#### **Check-in and Check-out Dates/ Times/ Locations:**

HARTLAND, WI

Week One: July 14-18, 2024

Check-In: Sunday, July 14, 2024 1-5pm at the Mullett Ice Center

Check-In: Sunday, July 14, 2024 1-5pm at the Swarthout Hall Dorm, Carroll University.

Check-Out: Thursday, July 18, 2024 3:30-4:00pm at the Mullett Ice Center

Please email us at <a href="mailto:info@proambitions.com">info@proambitions.com</a> or call us at (855)HKY-CAMP with any questions. I look forward to seeing you at camp this summer.

Best Wishes,

Jeff Serowik



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#### What to bring to your specific Pro Ambitions Hockey Boarding Camp...

#### HARTLAND, WI at CARROLL UNIVERSITY

**1. Full set of ice hockey gear-** skates, helmet with face shield and name plate on front of helmet, gloves, shoulder pads, elbow pads, groin area protector (cup), hockey pants, shin pads, hockey socks, and 1-2 on ice hockey sticks.

**Optional:** Tape, throat guard, extra on ice stick, extra skate laces, under armor garments

- **2. Off ice training gear-** off ice hockey stick, **s**neakers, hat, sun block, 1 weeks worth of the following items; tee shirts, shorts, athletic socks.
- **3. Water bottle-** 1-2 reusable water bottles with child's name written in black marker on bottle(s).
- 4. Bedding- Linens for a XL twin mattress, pillow, blankets.

Toiletries- Necessities- Soap, shampoo, toothpaste and toothbrush, 1-2 showering towels.

- **5. Non-Training Clothing-** 1 weeks worth of the following items: pants/ sweatpants, shorts, tee shirts, 1-2 sweatshirts, socks and under garments.
- **6. Medication** All medication must be in its original container with instructions for PA med staff.

All medications and instructions, regardless of prescription and over the counter medications must be handed in at camp check in.

Campers are not allowed to share their medication with other campers, including over the counter pain relief medication.

- **7. Room Necessities-** Fans and Alarm clocks are recommended for campus dorm room camps. The Carroll University dorms that we will be staying in are airconditioned.
- \* CARROLL UNIVERSITY does not allow the following items; refrigerators, microwaves or air conditioning units in the dorms.
- **8. Spending Money** \$50.00 to 100.00 is recommended for emergencies, additional activities and snacks. Pro Ambitions Hockey offers players an opportunity to deposit their spending money in camp bank at check in and will have access to their money each day or when needed.\* Pro Ambitions Hockey is not responsible for any lost money kept by the camper.
- **9. Optional Items-** We understand that cell phones, have become a necessity for campers. But campers are responsible for their cell phones at all times while at camp. Other electronic devices, such as, I-pods, I pads, laptops, etc. are allowed at camp, but campers are only allowed to use them during designated down time.

Once again, Campers are responsible for all of their personal items. Pro Ambitions Hockey and/ or Caroll University are not responsible for any lost or stolen items.



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#### HARTLAND, WI at CARROL UNIVERSITY

Your Child's Nutritional and	d Dietary Restrictions	;:
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Does your child have any dietary restrictions, food allergies, and/ or is Gluten free?
☐ Special Dietary needs/ restrictions:
Instructions for Health Care Provider/ Camp Director:
☐ Food Allergies? If so, does your child have an epi-pen?
Instructions for Health Care Provider/ Camp Director:
☐ Is your child Gluten Free?
Instructions for Health Care Provider/ Camp Director:

\* Additional information:



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## Pro Ambitions Hockey, Inc. – 2024 Hartland, WI Boarding Camp Program Roommate Preference Request

Please check off y	our Child's Car	mp Locatio	n:			
1. HARTLAND, W	l					
☐ Week One July	14-18, 2024					
player's rooming Ambitions Hocke	requests. But y. All roommat camp. All room	the final e request nmate requ	roommate s forms must uest forms ro	selection will be received o	ort in accommodating oe determined by Pro ne month prior to the his date are subject to	
Camper's Name:				Male:	Female:	
Age: E	Sirth Date:	/	/	(MM/DD/YYYY)		
ROOMMATE CHO	ICES					
1 <sup>st</sup> Choice			2 <sup>nd</sup> Cho	ice		
No Preference	(Check Bo	x if No Pre	eference)			
* If your child is a the most compati		•	f/ herself. W	e will do our b	est to place them witl	
Any additional inf	o about your ch	nild that m	ight be helpf	ul		