



Mitch Korn's SPECIALIZED GOALTENDERS' Clinic

**Learn from one of the NHL's best goalie coaches
at the Kettler Capitals Iceplex in Arlington, Virginia (**new location**)**

Session I: (goalies age 13 - adult) – **June 5, 6, 7 2009**

Session II: (goalies age 8 - 12) – **June 4, 6, 7, 2009**

To all Goaltenders, Parents and Coaches:

Welcome to Mitch's program. We look forward to providing the finest goaltending instruction possible. We work hard, they learn a lot, but always do it with lots of fun. Don't accept substitutes.



The School's Objective:

Goaltending is more than just stopping pucks. This unique program will teach and drill the physical skills related to goaltending such as butterflies, half butterflies, shuffles, transitions, down low plays, stick skills, etc., along with the mental skills such as save selections, "reading the play," situation analysis, angles, puck tracking, focus, etc. Each goaltender receives the latest Korn Goalie CD **FREE!!**

Format and Schedule:

In order to accomplish our objective, approx. 8 hours of ice time along with 3 ½ hours of classroom time will be used. Each goalie will have skills **videotaped**. We will also use custom made NHL DVD's to teach "goalie sense" along with proper read and reactions. Both sessions will begin with check-in on the first day at 5:45 p.m. The first day's session

will end at 9:45 p.m. The Saturday and Sunday schedules will vary, depending on the group. The Sunday session will conclude by noon. **A complete schedule will be mailed in late April.**

Ages and Structure:

We will accept ages 8 - adult, with the goaltenders grouped in "teams" by age and ability. Two sessions are being offered to better permit age-appropriate presentation of the material. **The above age groupings are approximate...**final enrollment will determine your group placement. All ice work is done as an individual, with a partner, or in a team of 4. What **you** do is important, not what the goalie does next to you. Each session's enrollment is **limited**. First come, first served. We always have a waiting list.



Head Coach/Clinic Director:

Mitch Korn (513) 226-4332 www.mitchkorn.com

-Goaltender Coach, Nashville Predators - 11 seasons

-Formerly 7 years as the Buffalo Sabres Goalie Coach

-Has coached Hasek, Vokoun, Kolzig, Biron, Mason, Conklin and now Ellis and Rinne

Local Clinic Coordinator:

Jody Tilseth (703) 757-9200

E-Mail: shutout100@aol.com

Fee:

\$380.00 per session

- Please make all checks payable to "Sportsbag, Inc."
- The full fee must accompany the application
- All goaltenders must supply their own equipment
- Sorry, there are **no refunds after May 1**
- A confirmation of acceptance & final schedule for your session will be mailed to you in late April.



Mail to:

Mitch Korn's Goalie Clinic
c/o Jody Tilseth
P.O. Box 1134
Herndon, VA 20172



Mitch Korn's
SPECIALIZED
GOALTENDER CLINIC
in Arlington, Va.
APPLICATION



***** CREDIT CARDS NOW ACCEPTED...call JODY at 239-287-5240 to arrange**

Goalie's Name _____ Goalie's Date of Birth _____

Address _____

City _____ State _____ Zip _____

Telephone (home): (_____) _____ (cell): (_____) _____

E-mail _____ Age as of June 1, 2009 _____

THE PROGRAM FEE OF \$380.00 PER SESSION MUST ACCOMPANY THIS APPLICATION FORM

I (We) the parents of _____ do hereby release Mitch Korn's Specialized Hockey Camp's, Inc., its staff and management, Mitch Korn, the host ice facility, Sportsbag, Inc., and all on-ice volunteers, from any bodily injury or harm, or property losses before, during, or after the daily sessions. As a parent, I am aware of the dangers and risks of ice hockey and playing and training for the goaltending position.

Date

Parent's Signature

Please complete the following for our records:

Current Club: _____

Level of Current Team (Example - "Bantam Travel A" or "Squirt House"): _____

Number of years playing goal: _____

