

TEAM COMMITMENT TO GOALTENDING INSTRUCTION PLAN

Year _____

| TEAM: | |
|--------------------------------------|----------------------------------------|
| | |
| | CHOOL: |
| LOCATION AND TYPE O | F INSTRUCTION: |
| On ice: Classroom: | Attending team practices: Other: |
| DURATION OF INSTRUCT Start Date: End | |
| COST IS COVERED BY: | Team: Parent: Other: |
| our two goaltenders: | team makes the following commitment to |
| | <u> </u> |
| Coach signature: | Date: |
| Goalies Parents signatures: | & |
| Copies to President | |