



The Southeastern District Officiating Program in conjunction with the District Affiliates and Player Development Program is honored to be sponsoring a five-day Official's Development Camp starting immediately after registration closes on **Wednesday the 8<sup>th</sup> of May & ending around 2:00 PM on Sunday the 12<sup>th</sup> of May, 2019.**

At the same time as this camp, the affiliates will be sponsoring the Southeastern District Hockey Festival where age qualified youth players will be trying out for teams that will compete at the national level. The National Teams will then be selected from the National Festival. This camp is patterned after the USA Hockey Official's Development Camp Program and the District Officiating Seminar Program and will be held at the **Extreme Ice Facility in Indian Trail, NC (Charlotte.)**

There are certain requirements to attend this camp:

- You **MUST** be a fully registered USAH official, Level 2 or higher. Exceptions may be made for Level 1's.
- You must be actively working games.
- You **MUST** be at least 18 years of age.
- You **MUST** complete and send in the attached application, which must be **received (NOT Postmarked) by Friday February 1, 2019. (No exceptions!)**
- You **MUST** complete and send in the corresponding Video Release (attached) with your application.
- **\*\*\*NOTE\*\*\* Applicants under the age of 18 will NOT be considered...**

**What will participants be required to do?**

- Referee and/or Line a minimum of 3 games
- Attend and participate in all on- & off-ice sessions, **all on-ice sessions require full officiating gear, with a hockey helmet and a half visor per USA Hockey Policy...NO EXCEPTIONS...**
- Participate in daily fitness regimen
- **Bring a laptop or tablet with a USB port. All materials will be distributed on a USB Flash Drive!!!**

**The selection process of participants will conclude no later than Friday the 15<sup>th</sup> of February 2019.** All considered applicants will be notified via email confirmation. Actual acceptance will be upon receipt of a written confirmation and a **non-refundable** administrative fee of \$80.00. Selections will be made in the following order:

1. State Supervisor recommendation/evaluation
2. Experience
3. Current USA Hockey Level (Highest to Lowest)

**Still interested???**

Complete the application/biography, video release, & pre-camp self-evaluation (attached) & submit by the deadline.

**All information must be RECEIVED no later than Friday February 1, 2019.**

Each participant **MUST** stay at the host (officials) hotel, since the days will be long and action packed and of course for safety and security purposes. Questions can be directed to [Jagabi@tampabay.rr.com](mailto:Jagabi@tampabay.rr.com). Upon final acceptance, each applicant will receive a breakdown of the fitness program to allow training preparation during the six weeks prior to the camp. Looking forward to seeing you there!

**The 2019 Camp is limited to 18 participants, so get your application in early!!!**

# **Southeastern District Select Camp**

**May 8<sup>th</sup> to 12<sup>th</sup>, 2019**

## **OFFICIALS APPLICATION**

### **DETAILS:**

**Where:** Extreme Ice; Indian Trail, North Carolina (Charlotte area)  
**When:** Wednesday May 8<sup>th</sup> through Sunday May 12<sup>th</sup>  
**Cost:** **Travel to and from camp is participant responsibility**  
**Hotel:** **INCLUDED:** Information will be provided upon acceptance.  
**\*\* Note \*\* Rooms will be assigned based on double occupancy.**  
**Included:** 10-hours of on-ice instruction, over 3-hours of live game action, high energy fitness training, classroom instruction, special guests, and many extras.

### **PERSONAL INFORMATION** (Please Type or Print Neatly in Black or Blue Ink)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Daytime Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Evening Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address: \_\_\_\_\_ (Mandatory) T-Shirt Size: \_\_\_\_\_

Current USA Hockey Level: \_\_\_\_\_ (All applicants' status will be checked)

Do you have any food allergies? \_\_\_\_\_ If yes, please describe \_\_\_\_\_

**NOTE: The submission of this application does not guarantee admission to the camp. Once all applications are received, the committee will notify applicants of their status.**

**YOU MUST BE AT LEAST 18 YEARS OF AGE TO APPLY TO THIS CAMP.**

**ALL APPLICATIONS MUST BE RECEIVED (Not Postmarked) AT THE BELOW ADDRESS NO LATER THAN FEBRUARY 1, 2019; ANY APPLICATIONS RECEIVED AFTER FEBRUARY 1, 2019 WILL NOT BE CONSIDERED...**

**DO NOT send in the \$80.00 camp fee with this application. If selected, instructions will be emailed to each camp selected official.**

**Mail Applications, Video Release & Questionnaire To:**

**Michael Catalano, DSC Director  
5957 Valentino Way  
Lakeland, Florida 33812**

**Electronic Applications (preferred) may be submitted by clicking on the appropriate link on the Southeastern District Web Site.**





## Video Release:

I, \_\_\_\_\_, hereby release the Southeastern District Officiating Program, the Staff of the Southeastern District Select Camp, the Extreme Ice Facility and all of its staff and employees, USA Hockey, Inc. and all of its members from any liability for me being video tape recorded.

This hold harmless agreement is made between me and the District Select Camp for the purpose of being video-tape recorded during the District Select Camp, and I hereby give permission to the staff of the District Select Camp to record me during the training camp.

These videos will be used for training purposes and may be shown during other training events. My signature below signifies that this release is true and valid and all person(s) mentioned herein are released of any liability that may arise from the visual display of the training videos.

I am signing this release of my own free will and understand that the DSC Director will affix his signature below to make this release valid.

Official: \_\_\_\_\_

Date: \_\_\_\_\_

Director: Michael Catalano \_\_\_\_\_

Date: \_\_\_\_\_



Name: \_\_\_\_\_

1. Why are you here?

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2. What are your expectations during this camp?

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3. On a scale of 0 to 10, with 10 being the best, rate your skating ability: \_\_\_\_\_

4. On a scale of 0 to 10, with 10 being the best, rate your officiating ability: \_\_\_\_\_

5. What is the area you feel you need the most improvement on:

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6. What levels are you currently working?

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7. What levels do you ***believe*** you should be working?

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