



# Application for LPS EDGE Hockey Academy: Excellence in Hockey and Academics

Thank you for expressing interest in the LPS EDGE Hockey Academy: Excellence in Hockey and Academics program! This innovative program is designed for high performance student-athletes who are eager to excel in both hockey and academics. It offers two high school credits, an opportunity for advanced hockey training, and the ability to develop essential athletic and academic skills.

The program focuses on high-level competitive hockey, providing elite training and competitive opportunities. It is a co-ed skills academy that promotes growth both athletically and academically, fostering teamwork, leadership, and character development. Students will work on improving their individual hockey skills while also enjoying the game and advancing their academic knowledge.

Whether you're seeking intensive prep hockey, diverse academic options, or the holistic support of a high school, LPS EDGE Hockey Academy offers everything in one comprehensive program. In their Grade 9 year, academy participants will earn eight credits, including two through participation in the Hockey Academy. Students should expect approximately 80 hours on the ice, with the remaining time spent in the gym, fitness room, or classroom. Participation in this program ensures that students maintain full commitment to their academic responsibilities, as it is designed to take place for only half of the school day within a single semester.

## Transportation & Fees:

Transportation will be provided from the rink back to the school for on-ice days. Parents/Guardians will be responsible for dropping off their child at the rink at the start of the day; schools will provide secure storage for hockey equipment. However, families will need to make arrangements for equipment pick-up as it cannot be brought on the school bus. Due to facility costs (ice time) and bus transportation, there will be a participation fee of \$500.00 per student. The program fees contribute directly to providing students with access to high-quality coaching from elite instructors, enhancing their overall experience and development.

*Please note, students must have their own hockey equipment to participate in the program.*

## Program Eligibility:

The co-ed LPS EDGE Hockey Academy program is open to all 2026-2027 grade 9 and 10 student-athletes with experience in competitive hockey. If you have any concerns about transportation or the program fee, please reach out to the principal of the high school.

Please complete the application below to be considered for the program. All sections must be filled out accurately for a complete submission.

**You belong here**

**Committed to the success of every student**

***Incomplete applications will not be accepted. Submitting an application does not guarantee a spot.***

## \*Participant Status

- ☐ New Applicant (First time applying)
- ☐ Returning Participant (you have participated in this program before)

Returning participants must complete all sections with an asterisk. \*

## \*Student Information

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

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

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

Gender: ☐ Male ☐ Female ☐ Other: \_\_\_\_\_ ☐ Prefer not to answer

Current School: \_\_\_\_\_

Grade Level in 2026-2027: ☐ Grade 9 ☐ Grade 10

### Returning Participant only:

Information Update - Have any of your personal details changed? ☐ Yes ☐ No  
*If yes, please update the information below.*

### Home Address

Street: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Student Phone Number: \_\_\_\_\_

### Academic Achievement

*\* This is required for all grade 8s and any applicant from outside the board*  
(If you are a returning EDGE Participant, you do not need to attach your report card.)

☐ Most Recent Report Card attached

## Parent/Guardian Information

(Returning Participants, only complete if changes have been made)

### Parent/Guardian 1

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

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

Relationship to Student: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

### Parent/Guardian 2 (if applicable)

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

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

Relationship to Student: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

## \*Transportation

LPS will provide one-way transportation from the rink back to school. Do you have access to transportation for the other part of the trip?

☐ Yes

☐ No

## Hockey Experience

Please indicate your years of experience and the level of play you have participated in:

### Years of Experience:

☐ 1 year

☐ 2-3 years

☐ 3-5 years

☐ 5+ years

### Level of Play:

☐ Recreational (Rec)

☐ House League

☐ A

☐ AA

☐ AAA

☐ Other: \_\_\_\_\_

### What position do you currently play?

Select all that apply.

☐ Forward

☐ Defence

☐ Goalie

List any formal hockey programs you have participated in (e.g., clinics, camps, academies, etc.):

Have you been involved in any other hockey-related achievements? (e.g., awards, captaincy, tournaments, etc.):

## \*Hockey References

Please provide the names and contact details of two individuals who can speak to your hockey experience and character.

If you are not new to the program, you only need to provide one reference.

### Reference 1

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

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

Relationship to Student: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

### Reference 2

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

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

Relationship to Student: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

## \*High School Selection

What school do you currently attend? \_\_\_\_\_

Please select the high school you plan to attend in 2026-2027.

☐ Hammarskjold High School

☐ Westgate CVI

## Additional Information

Why are you interested in applying to the LPS EDGE Hockey Academy?

What are your long-term athletic and academic goals, and how do you see the LPS EDGE Hockey Academy helping you achieve them?

Are there any additional details you would like the selection committee to know?

## \*Parental Consent & Signature

By submitting this application, you, the parent/guardian, are giving your consent for the student's participation in the LPS EDGE Hockey Academy: Excellence in Hockey and Academics program. You understand that the program involves physical activity and that safety protocols will be in place.

**You acknowledge that spots in this program are limited, and completing an application does not guarantee acceptance for all students.**

Parent/Guardian Signature: \_\_\_\_\_

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

## \*Student Signature

I, the student, understand the commitment required to be part of the LPS EDGE Hockey Academy and am excited to pursue the opportunity for both athletic development and academic growth. I also agree to demonstrate sportsmanlike behaviour on and off the ice, showing respect, responsibility, and integrity in all my actions and interactions with others.

Student Signature: \_\_\_\_\_

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

### Submission Instructions:

Please submit your completed application package to: [lps\\_edgehockey@lakeheadschoools.ca](mailto:lps_edgehockey@lakeheadschoools.ca) or to the main office of your current LPS elementary school.

The deadline for submission to the grade 9 program is **Wednesday, February 18th, 2026.**

The deadline for submission to the grade 10 program is **Wednesday, March 4th, 2026.**

If you have any questions, contact us at [kathleen\\_andrews@lakeheadschoools.ca](mailto:kathleen_andrews@lakeheadschoools.ca) or call 807-625-5104.

We look forward to reviewing your application and are excited to see the growth and success you will bring to the LPS EDGE Hockey Academy: Excellence in Hockey and Academics program!