

# RICHMOND TRAINING CENTRE

proudly presents

The Coaching Excellence Of

## *Mr. Richard Callaghan*

**“THE ULTIMATE OPPORTUNITY TO LEARN”**

Richmond Training Centre is proud to bring you World and Olympic coach Mr. Richard Callaghan. Richard is the long time coach of 6 time U.S men’s National and World champion *Todd Eldridge*. Richard has coached many top U.S skaters such as former U.S National champion *Nicole Bobek*, National, World and Olympic champion *Tara Lipinski*, and U.S. and World champion *Kimmie Meissner*. He currently teaches in Coral Springs, Florida, training Canadian bronze medalist *Lesley Hawker*, and former men’s bronze medalist *Fedor Andreev*. We are pleased to have Richard with us to conduct this seminar!

This is an excellent pre-summer warm up. On-ice, off-ice, and lecture sessions are for Junior Bronze to Gold Freeskate levels and Pre-Juvenile to Senior competitors. **Don’t miss out, be sure to attend!!!**

**Date:** Thursday May 8<sup>th</sup>, 2008

**Time:** 8:00 a.m. – 4:00 p.m.

- 1 – 30 minute lecture with Richard Callaghan
- 3 – 45 minute on-ice sessions with Richard Callaghan
- 1 – 40 minute off-ice session with Vesna Markovich
- 1 – 40 minute off-ice session with “Your Peak Performance” – Asma Shollert
- 2 – 40 minute session with national team member Lesley Hawker

**Place:** Tom Graham Arena, 1300 Elgin Mills Rd. East, Richmond Hill

**Cost:** \$150.00 per skater (coaches are free of charge)

*Note: bring your own lunch*

Please fill out application form, detach at the dotted line and send to: Richmond Training Centre  
Box 30507, 10660 Yonge Street  
Richmond Hill, Ontario L4C 0C7

\*\* Check our website for updates \*\* [www.richmondtc.com](http://www.richmondtc.com)

For further information contact the Richmond Training Centre at (905) 884-1361

REGISTRATION – SEMINAR APPLICATION

DEADLINE: MAY 2, 2008

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_ HOME CLUB \_\_\_\_\_

CLUB #: \_\_\_\_\_ HEALTH CARD#: \_\_\_\_\_

TEST PASSED: Freeskate \_\_\_\_\_ Competitive \_\_\_\_\_

SIGNATURE OF PARENT OR GAURDIAN \_\_\_\_\_

PAYMENT: CASH \_\_\_\_\_ CHEQUE \_\_\_\_\_ (make cheque payable to RICHMOND TRAINING CENTRE) VISA \_\_\_\_\_ M/C \_\_\_\_\_

Visa/MasterCard # \_\_\_\_\_ Expiry Date: \_\_\_\_\_

NAME ON CARD \_\_\_\_\_