

**Senior Academy -REGISTRATION**

Spring School

March 22<sup>nd</sup> – May 14<sup>th</sup>, 2010

.....  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Email: \_\_\_\_\_  
Sex: ( ) Male ( ) Female Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
Skate Canada # \_\_\_\_\_  
Care Card # \_\_\_\_\_  
Parent / Guardian Name: \_\_\_\_\_

The collection, use and / or disclosure of information are subject to the provisions of the Freedom of Information and Protection of Privacy Act.

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<b><u>MONDAY</u></b>	<b>5:00 – 5:45</b>	<b>Freeskate</b>	<b>59.50</b>	_____
<b>7 Sessions</b>	<b>5:45 – 6:15</b>	<b>Dance</b>	<b>48.00</b>	_____
	<b>6:30 – 7:15</b>	<b>Freeskate</b>	<b>59.50</b>	_____
	<b>7:15 – 7:30</b>	<b>Stroking</b>	<b>26.50</b>	_____
<b><u>TUESDAY</u></b>	<b>5:30 – 6:15</b>	<b>Freeskate</b>	<b>68.00</b>	_____
<b>8 Sessions</b>	<b>6:30 – 7:15</b>	<b>Freeskate</b>	<b>68.00</b>	_____
	<b>7:15 – 7:30</b>	<b>Stroking</b>	<b>30.00</b>	_____
<b><u>WEDNESDAY</u></b>	<b>5:30 – 6:15</b>	<b>Freeskate</b>	<b>68.00</b>	_____
<b>8 Sessions</b>	<b>6:15 – 6:30</b>	<b>Stroking</b>	<b>30.00</b>	_____
	<b>6:45 – 7:30</b>	<b>Freeskate</b>	<b>68.00</b>	_____
<b><u>THURSDAY</u></b>	<b>5:30 – 6:15</b>	<b>Freeskate</b>	<b>59.50</b>	_____
<b>7 Sessions</b>	<b>6:30 – 7:15</b>	<b>Freeskate</b>	<b>59.50</b>	_____
	<b>7:15 – 7:30</b>	<b>Stroking</b>	<b>26.50</b>	_____
<b><u>FRIDAY</u></b>	<b>5:00 – 5:45</b>	<b>Freeskate</b>	<b>42.50</b>	_____
<b>5 Sessions</b>	<b>5:45 – 6:15</b>	<b>Dance</b>	<b>34.00</b>	_____
	<b>6:30 – 7:15</b>	<b>Freeskate</b>	<b>42.50</b>	_____
	<b>7:15 – 7:30</b>	<b>Stroking</b>	<b>19.00</b>	_____
<b>*SKATE CANADA and INSURANCE</b>			<b>37.00</b>	_____
<b>Associate Member Fee (Non Club Members)</b>			<b>70.00</b>	_____
		<b>TOTAL:</b>		_____

\* Skate Canada Membership Fees and Insurance are paid once per year. Please add if you have not already paid these dues Sept. 1, 2009 – August 31, 2010.

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I hereby absolve and save harmless the Sandy Shores Skating Club from any claim I may have as a result of the above mentioned participation in any program. I understand that figure skating, as well as with all sporting activities carry certain risks. I do assume all responsibilities and hazards incidental to this activity and hereby waive all claims that I may have against the aforementioned organization, and individuals, and I shall obey all rules laid out in respect to the Sandy Shores Skating Club.

I have read and understood all of the above:

Signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_ 2010

Payment by: CHQ # \_\_\_\_\_ Cash \_\_\_\_\_

Credit Card \_\_\_\_\_ Exp: \_\_\_\_\_

