

Preston Figure Skating Club

Recreational Registration Form

Winter School 2019 - 2020



Skater Name:	Parents Name:	
Address:	City	Postal Code
Home Phone #	Skaters Clothing Size	Male ___ Female ___
Email address:	Birthdate: Month ___ Day ___ Year ___	
Badge Passed:	Skate Canada #	

Starts the week of October 9th, 2019:

From October 9 to December 22, 2019

Part A: Please mark an "x" for the requested session

PreSchool (Buddies on Blades) - Karl Homuth Arena	PreSchool (Buddies on Blades) - Preston Auditorium
Wednesday - 6:05 - 6:35pm _____	Saturday - 1:05 - 1:40pm _____
Thursday - 4:25 - 4:55pm _____	Saturday - 1:35 - 2:10pm _____
Thursday - 4:50 - 5:20pm _____	
*** 1st five minutes is spent with an off-ice warm up (fully dressed) ***	
CanSkate-Learn to Skate-Karl Homuth	CanSkate-Learn to Skate-Preston Arena
Wednesday - 6:10 - 7:00pm _____	Saturday - 1:10 - 2:10pm _____
Thursday - 4:30 - 5:20pm _____	
*** 1st five minutes is spent with an off-ice warm up (fully dressed) ***	

Gala 2020:

Dates: Mar 28, 2020

Part B: Fee Structure:

This fee includes: Skaters Ice Fees
Skaters Instruction
Skate Canada Insurance Fee

Gala Information:

To be part of the Gala on Mar 28, 2020 register for the entire winter program.

Description of Program	Indicate Program	Selection of Days			Program Total
		1 Day	2 Days		
Pre-School (Buddies)		\$ 160.00	\$ 200.00		\$
CanSkate (learn to skate)		\$ 200.00	\$ 240.00		\$
Grand Total					\$

*** If you register by December 15th, 2019 for the January to March session you will receive a \$ 10.00 discount. ***

Payment Plan: *Payment Option # 1* - Full amount is due the date you register

Payment Option # 2 - This is divided into 2 equal payments Payment dates are:
1st pmt: Upon Registering 2nd pmt: Nov 1st, 2019

Initial payment is required at the time of registration. Post-dated cheques must be submitted with application form to receive the 2 equal payment plan. Credit card will be billed 2 equal payments.

Parent/Guardian/Skater Waiver: I hereby release the Preston Figure Skating Club of Cambridge Inc., CTC/KLFSS Inc, the Arena management and Employees, Professional & assistant Coaches from any responsibility, for any accident or injury to any individual, or the loss or damage to any personal property however caused on or off the premises. I agree my child/ward will abide by the rules and regulations of the Preston Figure Skating Club of Cambridge Inc. as set by the directors. Any disregard for these rules will result in the removal of the Skater from our skating program without refund of any fees paid. Publication Waiver: as a Teaching Centre for youth figure skating, There are occasions to video tape and/or photograph children involved in the activities on & of the ice. These tapes and photographs are used for various reasons. We use them as educational tools, advertising, publicity information &/or promoting specific activities. These items are the property of the Preston FSC &/or Champions Training Centre. As well, children may be observed or invited to participate in an activity such as the Preston Annual Ice Show where photographs, slide presentations and/or video can be purchased by the public. On occasion coaching staff, Preston FSC Board Directors and/or parents take photographs and/or videotapes of children involved in various activities. These are often shared in the Centre and may become part of a collection of memories.

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Would you like **information** on private one on one lessons? yes or no
Private lessons are \$8.50 for 10min and held during your childs skating session.

Additional Notes:

- 1 Skaters are to wear a CSA Hockey Helmet for all sessions.
- 2 There is no skating on Saturday November 9th, 2019.
- 4 Please take a moment to review our 2019/20 Policy and Procedure for the Recreational Program. This is available on-line @ www.prestonfsc.com.

By Signing this form, you are confirming you are review the 2019/20 Policy and Procedure Document for the Recreational Program. You are confirming you have reviewed all of the waiver forms.

Parent / Guardian / Skater Signature: _____ Date: _____
(if under the age of 18 yrs of age)

<u>Part F: Payment Procedure:</u>	
<u>Option A: Payment by Credit Card:</u>	VISA or MasterCard Option: _____
Cardholder Name: _____	
Credit Card Number: _____	3 or 4 digit on back of card _____
<i>(Please put a " " in front of the credit card number so that it is entered properly)</i>	
Expiry Date: _____	Phone Number: _____
Please Check Payment Type: 1 Payment: _____	2 Equal Payments: _____
<u>Option B: Payment by Cheque:</u>	
Please Check Payment Type: 1 Payment: _____	2 Equal Payments: _____