

LEARN TO SKATE SPRING 2019

Champions Skating Center

6 Progress Drive Cromwell, CT 06416

Rink Phone 860-632-0323

www.championsskatingcenter.com / Email: sk8champions@gmail.com

Name _____ Age _____ Date of Birth ____/____/____ M F Level _____ New? Yes No

Street _____ City _____ Zip _____

Email _____ Phone _____ Parent's Name(s) _____

Learn to Skate USA Number or USFSA Number _____

Enroll	Class Type:	Day:	Time:	Fee:	Dates:	Class Requirement:
	Learn to Skate	Monday	6:00pm-6:50pm	\$144	8 Weeks	Children age 4 and up Snowplow-Basic 6
	HOCKEY Learn to Skate	Monday	6:00pm-6:50pm	\$144	8 Weeks	Snowplow 3 or higher
	USFSA Registration			\$20		*Current Membership Expired 6/30/2018*
	Learn to Skate	Thursday	6:00pm-6:50pm	\$144	8 Weeks	Children age 4 and up Snowplow-Basic 6
	HOCKEY Learn to Skate	Thursday	6:00pm-6:50pm	\$144	8 Weeks	Snowplow 3 or higher
	Adult / Teen	Thursday	6:00pm-6:50pm	\$144	8 Weeks	Teen / Adult will be a designated class
	USFSA Registration			\$20		*Current Membership Expired 6/30/2018*
	Learn to Skate	Saturday	11:30am-12:20pm	\$144	8 Weeks	Children age 4 and up Snowplow-Basic 6
	Hockey Learn to Skate	Saturday	11:30am-12:20pm	\$144	8 Weeks	Snowplow 3 or higher
	USFSA Registration			\$20		*Current Membership Expired 6/30/2018*

CLASS DATES:

Monday's – 02/25, 03/04, 03/11, 03/18, 03/25, 04/01, 04/08, 04/15

Thursday's – 02/21, 02/28, 03/07, 03/14, 03/21, 03/28, 04/04, 04/11

Saturday's – 02/23, 03/02, 03/09, 03/16, 03/23, 03/30, 04/06, 04/13

**** A \$15.00 fee will be applied if signup and payment is not complete prior to 3:00 pm on the first day of class. Please pre-register. ****

LIABILITY WAIVER: It is understood that Champions Skating Center, LLC assumes no responsibility or liability for injuries or loss of property, which might occur during skating activities. I hereby release Champions Skating Center, LLC from liability from injury suffered during participation, including injury resulting from negligence of Champions Skating Center, LLC. In consideration of the registration, the undersigned waives any claim or cause of action which might occur to him/her against Champions Skating Center, LLC by reason of injury or loss of or damage arising out of activities. I hereby grant permission to Champions Skating Center, LLC to photograph/video my child and use said photographs/video now and in the future for any and all marketing for the facility. I understand that photos/videos may be used without further notice or compensation and be available for download and distribution.

GENERAL INFORMATION:

- * Champions has a no refund policy
- * Champions has a no drop off policy for skaters 11yrs and younger
- * Champions has a no makeup policy and will allow 2 public skating passes for one missed class
- * Pro-rating allowed only when starting after start date for remaining weeks, based on availability.
- * Champions reserves the right to combine, cancel, alter, or change skating lessons
- *We recommend all students wear helmets, but students/parents will have to provide their own

Signature of Parent/Guardian: _____ Date: _____

Office Use Only: Payment: _____ Method of Payment: _____ Date Received: _____ Initials: _____