



Learn to Skate

Saturday Class Schedule

Each participant receives 25 minutes of practice ice and 25 minutes of instruction

Practice ice will be before or after your class time

Classes Offered

10:00AM	10:25AM	10:50AM
Parent/Tot	Adult Basics	Sam 3
Sam 1	Intermediate Hockey	Beginner Hockey
Sam 2	Advanced Hockey	Basic 2
Basic 1	Basic 4/5	Basic 3
	Parent/Tot	
	Sam 1	
*practice time after @ 10:25	*practice time after @ 10:50	*practice time before @ 10:25



Learn to Skate Registration 2010 Season

Skater's Name (First) _____ (Middle Initial) _____ (Last) _____ Date of Birth _____

Address _____ City _____ Zip _____

Home Phone Number _____ E-mail Address _____ Circle: Male or Female

Parent's Name _____ Work Phone _____ Cell Phone _____

Emergency Contact Other Than Parents _____ Emergency Contact Phone _____

AGREEMENT AND WAIVER (valid through August 2010): In consideration for the foregoing and in recognition of the dangers inherent in ice skating and associated on and off-ice sports activities, I for myself, my child, my executors, administrators and assignees do hereby release and discharge the Suburban Ice-Farmington Hills, Suburban Arena Management, any and all sponsors, volunteers and officials involved with the event, for all claim of damages, demands, actions, and whatever in manner. Participant acknowledges that during the course of participation in Suburban's activities, Suburban may take photographs, audio recordings and/or video recordings of participant. Participant hereby grants Suburban permission to use any and all such photographs or audio or video recordings of the participant for advertising, promotional or educational purposes. Such use may include publication in programs, advertising, posters, flyers, radio, television or other methods, and may be seen or heard by large numbers of individuals, including potential customers of Suburban. Participant waives all rights to any financial remuneration of any such use.

Authorized Signature

Date

Session	Class Level	Day	Time	Date Paid	Amount Paid	Form of Payment	Taken By	Skate Rental
Spring 1								<input type="checkbox"/> YES <input type="checkbox"/> NO SIZE _____ <input type="checkbox"/> HOCKEY <input type="checkbox"/> FIGURE SKATING
Spring 2								<input type="checkbox"/> YES <input type="checkbox"/> NO SIZE _____ <input type="checkbox"/> HOCKEY <input type="checkbox"/> FIGURE SKATING
Summer 1								<input type="checkbox"/> YES <input type="checkbox"/> NO SIZE _____ <input type="checkbox"/> HOCKEY <input type="checkbox"/> FIGURE SKATING
Summer 2								<input type="checkbox"/> YES <input type="checkbox"/> NO SIZE _____ <input type="checkbox"/> HOCKEY <input type="checkbox"/> FIGURE SKATING

Credit Card Number _____ CVV2 # _____ Expiration Date _____

Signature _____

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