



SKATE LAKESHORE

Fall & Winter 2015 / Spring & Summer 2016

CANSKATE - REGISTRATION

LOCATION:
Atlas Tube Centre, Rink C
INQUIRIES:
Skate Lakeshore
519-727-6919
skatelakeshore@hotmail.com

1 SKATER INFORMATION:	Skater's Name: _____	Birth Date: (mm/dd/yy) _____
Street Address / Apt #: _____		City / Town: _____
Postal Code: _____	Phone Number: _____	Email: _____
Special Needs: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Skate Canada Registration #: _____		(\$35 SKATE CANADA FEE DUE ANNUALLY)
2 PARENTAL INFORMATION:	Parent's Name: _____	Phone Number: _____
	Parent's Name: _____	Phone Number: _____
3 EMERGENCY CONTACT:	Name: _____	Relationship: _____ Phone Number: _____
4 REGISTRATION:	_____	

>> REGISTER FOR MULTIPLE SEASONS & SAVE - You can earn a 10% discount for each additional season!

CANSKATE *Fall*

- SEPTEMBER 22 - DECEMBER 8
Tuesdays, 5:45pm - 6:35pm
1 day / week \$187
- SEPTEMBER 26 - DECEMBER 19
Saturday, 9:15am - 10:05am
2 day / week save 50% off second day

CANSKATE *Spring*

- APRIL 5 - MAY 24
Tuesdays, 5:45pm - 6:35pm
1 day / week \$136
- APRIL 9 - MAY 28
Saturday, 8:45am - 9:35am
2 day / week save 50% off second day

CANSKATE *Winter*

- JANUARY 12 - MARCH 15
Tuesdays, 5:45pm - 6:35pm
1 day / week \$170
- JANUARY 16 - MARCH 26
Saturday, 9:15am - 10:05am
2 day / week save 50% off second day

CANSKATE *Summer*

- JULY 5 - AUGUST 9
Tuesdays, 5:45pm - 6:35pm
1 day / week \$102
- JULY 9 - AUGUST 13
Saturday, 8:45am - 9:35am
2 day / week save 50% off second day

>> Approved ice hockey helmet required. For your child's safety, bike helmets will NOT be permitted for use in our programs.

5 BALANCE DUE & POLICY INFORMATION:

Registration Total:	
Less 10% Multiple Season Discount	
+ \$35 Skate Canada Registration Fee	
+ Administration Fee	
Total Balance Due	

REFUND POLICY: Cash refunds will NOT be granted unless a medical certificate is received. A credit towards the following skating season will be provided once approved documentation is received. All credits must be used the following skating season and are only transferable to an immediate family member (brother/sister). Refunds and credits that are granted will be pro-rated. The \$35 Skate Canada fee and \$30 Administration fee will not be included in any credit or refund.

Refund Policy - Initial _____

NSF Cheques - There will be a \$35 NSF charge to all NSF cheques. Payment must be submitted in cash or money order within 5 days of notification that a cheque has been returned as NSF. A skater will not be permitted to skate until all outstanding payments are received.

**** Pro-rated pricing available for partial seasons. Ask for details.**

The Skate Lakeshore Board of Directors reserves the right to limit skaters per session, reduce available hours, and change times and dates based on registration numbers. The Board of Directors also reserves the right to adjust a skater's session based on their skill level.

MISSED DAYS - Skate Lakeshore is not responsible for any ice time lost due to hockey tournaments, test dates, ice cancellations or holidays. Make up days will not be permitted regardless of the time missed.

EMAIL / DIGITAL NOTIFICATIONS & PHOTO CONSENT: I consent to receive email and or digital notification from Skate Lakeshore informing of upcoming events, registrations, cancellations and information from our sponsors. This confirmation is now required under the federal anti-spam legislation which came into effect on July 1, 2014. In addition, I understand that photos may be taken by parents, board members or an approved photographer for digital and print promotion of Skate Lakeshore.

EMAIL / DIGITAL NOTIFICATION CONSENT - Initial _____

WAIVER: I understand that Skate Lakeshore and its personnel do not accept any responsibility for any injury to my child incurred while skating or traveling to and from the club's sessions. I understand that Skate Canada fees are non-refundable and insures the skater only for scheduled ice sanctioned by Skate Canada. The skater is not insured by Skate Canada if they are on non-sanctioned ice. I also understand that parental supervision is strongly recommended and encouraged by the club and that if any injury occurs and I am not present, the coach, or club personnel have my permission to seek medical attention for my child. I am also aware that photos may be taken during Skate Lakeshore skating sessions, fundraisers and events. I understand and agree to the terms and conditions of the waiver, policies, and registration described above:

Print Name: _____ Signature: _____ Date: _____