

NAFSC REGISTRATION FORM
Winter 2010 *Skate with US Program* (One form per skater please)

SKATERS NAME: _____ AGE: _____ BIRTHDATE: _____ FEMALE/MALE _____

PARENT/GUARDIAN NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: DAY: _____ EVENING: _____ CELL: _____

EMAIL ADDRESS: _____ (please print clearly)

EMERGENCY INFORMATION *Every effort will be made to contact the parents first. Please give an alternative name and telephone number. CONTACT: _____ PHONE: _____

SPECIAL NEEDS OR CONCERNS: _____

CURRENT SKATING LEVEL: _____ **(must fill in)**

Thursday Classes – 9 Weeks

_____	4:00-4:25	Snowplow Sam 1, 2, and 3 (Ages 3, 4, & 5)	\$ 90.00
_____	4:25-5:15	Basic 1, Basic 2, and Basic 3	\$126.00
_____	5:25-6:15	Basic 4, Basic 5, Basic 6, Basic 7, and Basic 8, Freestyle 1	\$126.00
_____	5:25-6:15	Practice Ice for Freestyle 2-6 & higher	\$ 63.00
_____	6:25-6:55	Freestyle 2, 3, 4, 5, 6, & New Axel class	\$117.00
_____	6:25-6:55	Adult/Teens - Beginner through Adult level 4	\$117.00

Saturday Classes – 6 Weeks

_____	8:00-8:50	Basic 1, 2, 3, 4, 5, 6, 7, & 8	\$ 84.00
_____	8:25-8:50	Snowplow Sam levels 1, 2, & 3 (Ages 3, 4, & 5)	\$ 60.00
_____	8:55-9:20	Moves in the Field Classes – Pre-Pre, Preliminary, Pre-Juv. & Juvenile	\$ 60.00
_____	9:30-10:20	Freestyle 1, 2, 3, 4, 5, 6	\$ 84.00
_____	10:20-11:00	Open Practice Ice	\$ 72.00

Wednesday Classes – 7 Weeks

_____	1:00-1:50	Basic 1, 2, 3, 4	\$ 98.00
_____	1:25-1:50	Snowplow Sam levels 1, 2, & 3 (Ages 3, 4, & 5)	\$ 70.00
		Sub Total	\$ _____

ALL FAMILIES MUST PAY THIS ANNUAL FEE (Skating year is Sept. 2009- August 2010) 10.00
\$10.00 - Late fee is for ALL registrations postmarked after the deadline! Late Fee _____
Total amount enclosed \$ _____

Full amount is due at time of registration. No pro rating of classes. No make ups for missed classes. No Refunds after the 2nd class. Refunds have a \$10.00 processing fee. We do not accept credit cards.

Please make checks payable to: North Atlantic Figure Skating Club or NAFSC
Mail to: Winter 2010 Group Lessons
P.O. Box 6052
Falmouth, ME 04105

LIABILITY WAIVER: IN CONSIDERATION OF MY CHILD ENROLLING IN THE PROGRAM, I AGREE TO INDEMNIFY AND HOLD HARMLESS THE LEARN TO SKATE PROGRAM, NAFSC, FAMILY ICE CENTER AND ALL OF ITS OFFICERS, AGENT SERVANTS OR EMPLOYEES AND PARTICIPANTS FROM ALL CLAIMS, LOSS LIABILITY, DAMAGE AND EXPENSE WHICH MAY IN ANY WAY ARISE FROM MY CHILD'S PARTICIPATION IN THE LEARN TO SKATE PROGRAM. I FURTHER UNDERSTAND THAT THERE WILL BE NO MAKE UP CLASSES OR REFUNDS GIVEN FOR CLASSES UNATTENDED BY THE STUDENT, AND THAT THE INSTRUCTORS CAN BE CHANGED WITHOUT PRIOR NOTICE. PARENT/GUARDIAN (PRINT NAME) _____
SIGNATURE _____ DATE: _____