

TOTS

For beginners, ages 3 yrs and up with skaters grouped according to age and ability in a 10 week session

Day: **MONDAY MORNINGS**
Term: April 1 - June 10
Off May 27
Ten (10) weeks
Time: **10:20 - 11:20 am**
Cost: **\$190 per person**

Day: **TUESDAY AFTERNOONS**
Term: April 2 - June 4
Ten (10) weeks
Time: **1:10 - 2:10 pm**
Cost: **\$190 per person**

Day: **THURSDAYS**
Term: April 4 - June 6
Ten (10) weeks
Time: Mornings **10:20 - 11:20 am** or
Afternoons **1:10 - 2:10 pm**
Cost: **\$190 per person**

Day: **FRIDAYS**
Term: April 5 - June 7
Ten (10) weeks
Time: Mornings **10:00 - 11:00 am**
Cost: **\$190 per person**

BASIC SKILLS

This program provides basic ice skating instruction, focused on building skills, creating confidence and having fun. Skaters are grouped according to age and ability -kids only in this 11 week session.

Day: **FRIDAY EVENINGS**
Term: April 5 - June 14
Eleven (11) weeks
Time: **5:30 - 6:30 pm**
Cost: **\$242 per person**

Day: **SATURDAY MORNINGS**
Term: April 6 - June 15
Eleven (11) weeks
Time: **11:20 am - 12:20 pm**
Cost: **\$242 per person**

Day: **SUNDAY EVENINGS**
Term: April 7 - June 18
Eleven (11) weeks
Time: **5:00 - 6:00 pm**
Cost: **\$242 per person**

Skater Development Saturdays
-Rising Stars 12:30 pm - 1:30 pm \$308

PRIVATE LESSONS
If you are interested in private or semi-private skating lessons, please call one of our Co-Directors to discuss your options.
Call Andrea or Arlene (978) 684-7203.

Spring 2024 REGISTRATION FORM

Registrant's Name _____ Email _____

Street _____ City _____ State _____ Zip _____

Home Phone _____ Daytime Phone _____

Gender: Male Female Date of Birth _____

Parent/Guardian's Name _____ Current Badge Level _____

How did you hear about our programs? _____

<u>PROGRAM</u>	(Please <u>CIRCLE</u> your preferred time)	<u>AMOUNT</u>
_____ Tot Lessons	Mondays 10:20 am	Fee - \$ 190 _____
	Tuesdays 1:10 pm Thursdays 10:20 am	
	Thursdays 1:10 pm Fridays 10:00 am	
_____ Basic Skills	Fridays 5:30 pm	Fee - \$ 242 _____
	Saturdays 11:20 am Sundays 5:00 pm	
		TOTAL - _____

Release of Liability

I am aware that the hazards of ice skating may include serious injury to bones, joints, ligaments, muscles, tendons and other parts of the muscular skeletal system; and serious injury or impairment to organs and other parts of my body, with impact on my health and general well being. I am/ my child is physically able to participate in the activities of this program and is covered by health insurance, as identified on this registration form. In consideration of the Academy permitting me to register for this program, I hereby voluntarily assume all risks associated with participation in this program and agree to hold harmless the Academy, its agents, trustees, officers, and employees from any and all liability, claims, causes of action or demands of any kind and any nature whatsoever which may arise from or in conjunction with my participation in this program, except in the event of gross negligence. The terms of this Agreement shall serve as a release and assumption of risk for me and all members of my family listed on this application.

Signature (Parent/Guardian, if under 18 years of age) _____ Date _____

METHOD OF PAYMENT _____ Cash _____ Check # _____ Amount Received: _____
_____ Credit Card _____ Amount Charged: _____
Visa MC Card # _____ Expires _____