TOTS

For beginners, ages 3 yrs and up with skaters grouped according to age and ability in a 7 to 9 – week session.

Day: MONDAY MORNINGS

Term: October 27 – December 22

Nine (9) weeks

Time: 10:20 - 11:20 am

Cost: \$180 per person

Day: TUESDAY AFTERNOONS

Term: October 28 – December 23

Nine (9) weeks

Time: 1:10 - 2:10 pm

Cost: \$180 per person

Day: THURSDAYS

Term: October 30 - December 18*

Seven (7) weeks *(OFF 11/27)

Time: Mornings **10:20 – 11:20 am** <u>or</u>

Afternoons 1:10 - 2:10 pm

Cost: \$140 per person

Day FRIDAYS

Term: October 31 – December 19

Eight (8) weeks

Time: Mornings 10:20 - 11:20 am <u>or</u>

Afternoons 1:10 - 2:10 pm

Cost: \$160 per person

Tots Hockey Fridays

October 31 – December 19 1:10 – 2:10 pm \$192 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 a 8 week session.

Day: FRIDAY EVENINGS

Term: November 7 – December 19

Seven (7) weeks

Time: 5:00 - 6:00 pm

Starts *6:10pm on 12/5 + 12/12

Cost: \$168 per person

Day: SATURDAY MORNINGS

Term: November 1 – December 20

Eight (8) weeks

Time: 10:50 - 11:50 am
Cost: \$192 per person

ASPIRE Skater Development Saturdays

-Off-ice Conditioning 10:50 am – 11:50 am \$96 -Rising Stars 12:00 pm – 1:00 pm \$240

Day: SUNDAY EVENINGS

Term: November 2 – December 21

Eight (8) weeks

Time: 3:50 - 4:50 pm <u>or</u>

5:00 - 6:00 pm

Cost: \$192 per person

PRIVATE LESSONS

If you are interested in private or semiprivate skating lessons, please call one of our Co-Directors to discuss your options.

Call Andrea or Arlene (978) 684-7203.

Winter I 2025 REGISTRATION FORM

Registrant's Name	Email		
Street	City	StateZip_	
Home Phone Daytime Phone			
Gender: Male Fema	le Date of Birth		
Parent/Guardian's Name		Current Badge Le	vel
TT 1:1 1 1			
How did you hear about our	1 0		
PROGRAM (Please <u>CIRCL</u>	<u>E</u> your preferred time)		<u>AMOUNT</u>
Tot Lessons Mond	lays 10:20 am Tuesdays 1:10 pm	Fee - \$ 180	
Thursdays 10:20 am	Thursdays 1:10 pm	Fee - \$ 140	
Fridays 10:20 am	Fridays 1:10 pm	Fee - \$ 160	
Basic Skills	Fridays 5:00 pm	Fee - \$168	
Saturdays 10:50 am			
-	Sundays 5:00 pm	Fee - \$192	
		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.			
of my family listed on this application.			

 METHOD OF PAYMENT
 Cash ___ Check #___ Amount Received:

 ___ Credit Card
 Amount Charged:

Visa MC Card # _ _ _ _ _ Expires _____

I hereby authorize Phillips Academy to charge my credit card the amount listed above.

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

Cardholder Signature