

Halifax Skating Club – Winter Application 2010

Return application form and all applicable fees to: **Halifax Skating Club, 27 Vimy Avenue, Halifax NS B3M 1G5**

Name _____	Birthdate: M _____ D _____ Y _____
Address _____	Gender: F _____ M _____
City _____	Postal Code _____ Phone # _____
E-Mail Address _____	
Skate Canada # _____	MSI # _____
Professional Coach _____	Phone # _____
Highest Freestyle/Competitive Test Passed _____	
Highest Skill passed _____ Highest Dance Passed _____	

Test Permission & member in good standing: (Please complete this section. All applications *must* be signed by club official. Skaters will not be accepted with **Halifax Skating Club** without signature.)

Skater's Name _____ Home Club _____ Club # _____

Club Mailing Address _____

*This skater is a member in good standing and is granted permission to test at **Halifax Skating Club Winter 2010**.*

Signature of Club Official _____ Date _____

PACKAGES: Please indicate with an (X) the days to be skated

<p><u>JUNIOR</u></p> <p>___ TUESDAY \$192.00</p> <p>___ SUNDAY \$192.00</p> <p>2-DAY PACKAGE (less \$30.00 off total price) -\$_____</p>	<p><u>INTERMEDIATE II</u></p> <p>___ TUESDAY \$216.00</p> <p>___ THURSDAY \$300.00</p> <p>___ SUNDAY \$216.00</p> <p>2-DAY PACKAGE (less \$30.00 off total price) -\$_____</p> <p>3-DAY PACKAGE (less \$45.00 off total price) -\$_____</p>
<p><u>INTERMEDIATE I</u></p> <p>___ TUESDAY \$156.00</p> <p>___ THURSDAY \$156.00</p> <p>___ SUNDAY \$156.00</p> <p>2-DAY PACKAGE (less \$30.00 off total price) -\$_____</p> <p>3-DAY PACKAGE (less \$45.00 off total price) -\$_____</p>	<p><u>SENIOR</u></p> <p>___ TUESDAY \$216.00</p> <p>___ THURSDAY \$300.00</p> <p>___ SUNDAY \$216.00</p> <p>2-DAY PACKAGE (less \$30.00 off total price) -\$_____</p> <p>3-DAY PACKAGE (less \$45.00 off total price) -\$_____</p>

Total Program Fee \$ _____ (see program information sheet)

Late Fee \$ _____ (after December 15, 2009 applications will be subjected to a late fee \$25.00)

Skate Canada Fee \$ _____ \$31.00 (2009/2010 season – IF NOT ALREADY PAID)

Less Multi-day Discount \$ _____ (\$30.00 or \$45.00 off total program fee)

Less Family Discount \$ _____ (\$20.00 each for 2nd child and all other children)

Less Ice Credits \$ _____

Amount Payable \$ _____ (total)

Deposit \$ _____ (50% of amount payable due **December 15/09**)

Balance \$ _____ (50 % of amount by post dated cheques **February 1, 2010**)

All post dated cheques to be sent with application. All cheques payable to the Halifax Skating Club

****All coaches must be approved to coach at Halifax Skating Club. Please make sure your coach has applied and has been approved****

Waiver

*In consideration of the benefits to us awarded by acceptance of this application, the undersigned agree to hold and save harmless the Skate Canada Association, Nova Scotia Section, and the staff, coaches and volunteers of **Halifax Skating Club** for any claims or injuries sustained while in attendance at the **Halifax Skating Club Fall 2009**. The undersigned also agree to conform to all rules and regulations as set down by the **Halifax Skating Club** staff and shall act accordingly.*

Signature of Parent or Guardian _____ Date _____