

For Office Use Only: SC _____ SC# _____ E-mail _____ Reg List _____
 Cheque # _____ Name on Cheque: _____ Date Payment Rec'd _____ RPCC Member



CanSkate Registration Form

Last Name: _____ First Name: _____

Address: _____

City: _____ Postal Code: _____

Date of Birth: _____ Gender: Female Male
 (dd/mm/yy)

E-mail: _____

★This is our main means of communication so please complete. If you don't have an email address, please indicate in the box.

Skate Canada Number (if applicable): _____

Medical Number (MSP): _____

Parents' Names: _____

Phone Numbers: (H) _____ (C) _____

Emergency Contact Name: _____ Phone: _____

Please check one:

- Returning RPFSC Member New RPFSC Member Transfer from: (club name) _____

✓ Please Check	Day	All Year (Sept-Mar)	Fall Only (Sept-Dec)	Winter Only (Jan-Mar)	Fee:
	Tuesdays 3:45-4:45				
	Thursdays 3:45-4:45				
	Saturdays 11:45-12:45				
TOTAL:					

PRICES:

Session	Once per Week	Additional Day
Full Year: September-March	\$275	\$100
Fall: September-December	\$160	\$60
Winter: January-March	\$140	\$50

Note: Prices include non-refundable \$33 Skate Canada Membership Fee & Insurance

The Riley Park Figure Skating Club, its board members, volunteers and coaches are not responsible for any accidents, injuries or loss of personal belongings either on or off the ice at Riley Park Arena while attending our programs.

Riley Park is not responsible for cancellation of classes due to unavailable ice, but will make every effort to reschedule, if at all possible. Ice time is non-transferable. The Club is not responsible for supplying make-up time for sessions missed by the skater. Every attempt will be made to make up ice time that has been cancelled by the Club.

A fee of \$20.00 will be charged for any NSF cheques. Refunds will only be issued for medical reasons. All refunds will be pro-rated and subject to an administration fee of \$25.00. The \$33 Skate Canada Fee is non-refundable.

I have read these policies:

Signed: _____ Date: _____
 (parent or guardian if minor child)

Photograph Permission:

I give permission for my child to be included in photographs and/or videos which may be used for publications, media coverage, club website or promotional activities for Riley Park Figure Skating Club.

Signed: _____ Date: _____

Reminder to Parents: Please do not leave the rink during your child's lesson.