

2018 Spring Figure Skating @ Falmouth Ice Arena

April 16- June 14

Contracted Ice cost = \$10 per session / Walk-on cost = \$15 per session

Skaters contracted for full Spring Session will be eligible for Skating Exhibition Friday, June 8 @ 5:30pm.

No make ups for sessions missed, except school vacation week 4/16-4/19, no refunds given, you can make up on a session that has availability.

All Coaches must present copies of USFS & PSA Certification and Liability Insurance to office.

All sessions will be limited to 20 skaters.

Please check the sessions you wish to contract:

Monday –no skating on 5/28

3:30-4:20____ \$10 x 8 (weeks) = \$80

4:30-5:20____ \$10 x 8 (weeks) = \$80

5:30-6:20____ \$10 x 8 (weeks) = \$80

Wednesday

3:30-4:20____ \$10 x 9 (weeks) = \$90

4:30-5:20____ \$10 x 9(weeks) = \$90

5:30-6:20____ \$10 x 9(weeks) = \$90

Tuesday

3:30-4:20____ \$10 x 9(weeks) = \$90

4:30-5:20____ \$10 x 9 (weeks) = \$90

5:30-6:20____ \$10 x 9 (weeks) = \$90

Thursday

3:30-4:20____ \$10 x 9(weeks) = \$90

4:30-5:20____ \$10 x 9(weeks) = \$90

Non-refundable deposit of \$20 is required, with payment due on first session to be skated.

All checks made payable to: FIA (Falmouth Ice Arena)

Total = \$ _____.

Mail form and payment to: Falmouth Ice Arena

Deposit made = \$ _____.

9 Technology Park Drive

Balance due = \$ _____.

East Falmouth, MA 02536

Name: _____

Phone #: _____

Email Address: _____

I/we understand that accident, health and personal insurance are not provided. I/we verify the above information to be true and give our child permission to participate in the spring figure skating with Falmouth Ice Arena. I/we hereby waive, release, absolve, indemnify and agree to hold blameless Falmouth Ice Arena its organizers, sponsors, supervisors and participants. I/we assume all risks and hazards incidental to such activities and participation.

Parent/Guardian Signature _____

Date _____