

# SKATING SKILLS FOR HOCKEY

@ FALMOUTH ICE ARENA

**\*MITES/ U10\* 10:30-11:20am**

**JULY 1-AUGUST 19, 2019**

**Cost: \$160**

**Instructor: Deb Fernandes**

**Full Equipment and stick are required**

**Limited number of skaters to class**

**Name** \_\_\_\_\_ **Age (as of 7/1/19) :** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_  
\_\_\_\_\_

**Parent Name** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Accident Release: I do hereby release the Instructor, Falmouth Ice Arena, and staff from any possible claims, liabilities, obligations or responsibilities from any and all accidents or injuries, whether they be on or off ice, or skating related or not, while my child is participating in the program. I further certify as to my child's sound health of mind and body. I intend this instrument to take effect as a sealed instrument.**

**Signature of Parent or Legal Guardian**

\_\_\_\_\_ **Date** \_\_\_\_\_

**Forms and Payment can be dropped off at Falmouth Ice Arena office or mailed to:**

**Deb Fernandes**

**169 Shootflying Hill Rd**

**Centerville, MA 02632**

**Any questions, email: [dfskate@aol.com](mailto:dfskate@aol.com)**

# SKATING SKILLS FOR HOCKEY

@ FALMOUTH ICE ARENA

**\* PEE WEE/ U12\* 9:40-10:30am**

**JULY 1-AUGUST 19, 2019**

**Cost: \$160**

**Instructor: Deb Fernandes**

**Full Equipment and stick are required**

**Limited number of skaters to class**

**Name** \_\_\_\_\_ **Age (as of 7/1/19) :** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Parent Name** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Accident Release: I do hereby release the Instructor, Falmouth Ice Arena, and staff from any possible claims, liabilities, obligations or responsibilities from any and all accidents or injuries, whether they be on or off ice, or skating related or not, while my child is participating in the program. I further certify as to my child's sound health of mind and body. I intend this instrument to take effect as a sealed instrument.**

**Signature of Parent or Legal Guardian**

\_\_\_\_\_ **Date** \_\_\_\_\_

**Forms and Payment can be dropped off at Falmouth Ice Arena office or mailed to:**

**Deb Fernandes**

**169 Shootflying Hill Rd**

**Centerville, MA 02632**

**Any questions, email: [dfskate@aol.com](mailto:dfskate@aol.com)**

# **SKATING SKILLS FOR HOCKEY**

**@ FALMOUTH ICE ARENA**

**\*HIGH SCHOOL / U16\* 8:30-9:30am**

**JULY 1-AUGUST 19, 2019**

**Cost: \$175**

**Instructor: Deb Fernandes**

**Full Equipment and stick are required**

**Limited number of skaters to class**

**Name** \_\_\_\_\_ **Age (as of 7/1/19) :** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Parent Name** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Accident Release: I do hereby release the Instructor, Falmouth Ice Arena, and staff from any possible claims, liabilities, obligations or responsibilities from any and all accidents or injuries, whether they be on or off ice, or skating related or not, while my child is participating in the program. I further certify as to my child's sound health of mind and body. I intend this instrument to take effect as a sealed instrument.**

**Signature of Parent or Legal Guardian**

\_\_\_\_\_ **Date** \_\_\_\_\_

**Forms and Payment can be dropped off at Falmouth Ice Arena office or mailed to:**

**Deb Fernandes**

**169 Shootflying Hill Rd**

**Centerville, MA 02632**

**Any questions, email: [dfskate@aol.com](mailto:dfskate@aol.com)**