



STARGROUP PROGRAM 2017-2018

Box 402 Medicine Hat, AB T1B 7G2

(403)529-0092(O) (403)529-0483(F)

Email: mhskate@telus.net Website: www.mhskatingclub.com



By completing this form and making payment you hereby agree to all the terms and conditions outlined on this registration form and to the policies of the Medicine Hat Skating Club.

Stargroup - Introduction to figure skating

This class is for those skaters that show interest and ability to pursue figure skating. It is a gentle transition from the CanSkate to the figure skating program and offers a more challenging program specific to the sport of figure skating. It includes coach supervised practices once or twice a week and one off ice class each day.

Where to go from here? Once your skater has completed the basic skills they can enroll in the StarSkate program, which is for skaters wishing to increase their skating skills. Skaters can choose to skate recreationally, take the Skate Canada Test route, enter competitions or a combination. Skaters and parents decide the route they would like to go, then together with the coach come up with a plan to help your skater reach the goals they have set for themselves!

Equipment? Skaters can wear a helmet until they feel comfortable skating without one and they need skates.

TUESDAY CLASS

Off Ice 4:50-5:20
Stroking 5:30-5:45
Group Lesson 5:45-6:45

SATURDAY CLASS

Group Lesson 10:00-11:00
Stroking 11:00-11:15
Off Ice 11:30-12:00

Any Stargroup skater at a level 5-6 can attend the Synchro – Tuesday 7:00-7:45

We are trying to start a team that would go to at least 1 competition. This is a team of a minimum of 8 skaters. Please ask for further details about possible additional costs.

Communication: If you have questions or concerns throughout the Season email them to the office mhskate@telus.net and the office will forward it to the coach representative.

Calendar: prior to the start of our season the calendars for the whole season will be posted on our website www.mhskatingclub.com under the calendar tab.

YEAR END SHOWCASE: March 10, 2018 10:00-11:15 @ FLC

Skater's Information	
Name:	M or F:
Birth Date: mm/dd/yyyy	Previous Level passed if known:
Medical Issues/Allergies (if any):	

Program Fees	
Tuesday AND Saturday *includes skate Canada fee	499.00 savings \$100.00
Tuesday OR Saturday *includes skate Canada fee	299.00

Fundraising - per family not per skater	
You are required to participate in all fundraising that occurs in the season. This will include selling 50/50 tickets and WestJet 2 free flights anywhere tickets. If another fundraiser is needed, you will be required to participate. If you do not fulfill the commitment your cheque will be deposited	Cheque dated March 1, 2018 \$150.00
OR BUY OUT – payment due at registration	\$150.00
PICTURE DAY - We will have a picture day for all our StarSkate skaters. This will include a large group photo and 5 individual photos for \$35.00. The location and schedule will be determined once we know how many will be in attendance. The date will be late October or November.	Program Fee
	Fundraising Fee
	Total

PAYMENT IN FULL			
PAID BY:	CASH	CHEQUE#	BURSARY\$
VISA Auth#		MC Auth#	
CARDHOLDER NAME:			
CREDIT CARD NUMBER			
EXPIRY DATE		CSC	
FUNDRAISING \$150.00		POST DATED CHQ#	
OR FUNDRAISING Buy Out \$150.00		CHQ#	Visa/MC
RECEIPT NUMBER 17-18-		DATE	

Parent/Guardian Information	
Father:	Mother:
Address:	
City:	Postal Code:
Phone Number:	
E-Mail:	

FOIP Waiver - In accordance with the Freedom of Information and Privacy Act, I give the Medicine Hat Skating Club permission to publish my child's first and last name and/or photo on arena bulletin boards, trophies, display cases, carnival programs, newsletters, newspapers, website and any other areas pertaining to the "skating world". _____Initials

Liability Waiver and Release Form - It is understood and agreed, as a condition of participation in skating programs offered by Medicine Hat Skating Club and Skate Canada, that neither the Club nor Skate Canada shall be liable for any injury, loss or damages incurred by _____ while traveling to or from, or while participating in skating practices, competitions or other activities however caused. The member, or his/her parent/legal guardian, who has signed this form, shall indemnify the Club and Skate Canada and hold them harmless from any claims, demands or actions arising from or in respect of such injury, loss or damage. In the event of an injury or accident, and the Medicine Hat Skating Club is unable to contact the "contact persons" on file, I/we give permission for the coaches/Club Executives to arrange for medical help. I/we agree to cover any and all expenses and costs related to the injury/accident. I agree that I am fully responsible for any outstanding amounts owed to the Medicine Hat Skating Club. _____Initials

Refund Policy - No refund after 30 days unless accompanied by a doctor's note. Refund will be less the skate Canada and Administration fee and prorated.. _____Initials

Email Legislation - YES I would like to be added to the email list for the Medicine Hat Skating Club _____Initials

PAYMENT PLAN – split into 2 equal payments		
1 st PAYMENT Sept 1, 2017 PAID BY:		
CASH	CHQ#	VISA/MC
FINAL PAYMENT Nov 1, 2018 PAID BY:		
Postdated CHQ#	VISA/MC	