## 2018/2019

# PRECANSKATE/CANSKATE SPRING PROGRAM

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.

<b>UESDAY AND THURSD</b>	AY May. 8 & 10	4:00-4:45	@ FLC
	May 15 & 17	6:45-7:30	@ FLC
	May 22 & 24	4:00-4:45	@ FLC
	May 29 & 31	6:45-7:30	@ FLC
	June 5 & 7	4:00-4:45	@ FLC

We reserve the right to cancel if numbers do not allow

### PreCanSkate

For beginners of any age that are unable to get up on their own and are limited on movement without assistance. No Pushers are allowed and No Parents are on the ice

#### CanSkate

CanSkate is Skate Canada's flagship learn-to-skate program for beginners of all ages that teaches fundamental movements (go forward, go backward, stop, turn, spin and jump) and basic skills. No Pushers are allowed and No Parents are on the ice

## Calendars on the back

Skater's In	formation		
Name:			
Birth Date:	mm/dd/yyyy	AB Health Care#	
Medical Issue	es/Allergies (if a	any):	
Parent/Guard	dian Information	1	
Father:		Mother:	
Address			
City:		Postal Code:	
Phone #:			
E-Mail:	<u> </u>		

Program Fees Please check the group you would like	
PreCanSkate	\$180.00
CanSkate	\$180.00
Skate Canada number if do not have a current one	\$33.00
TOTAL	\$

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		PAYME	NT		-
PAID BY:	CASH	CHEQU	JE#	BURSARY\$	
VISA Auth#				MC Auth#	
CARDHOLD	ER NAME:				
CREDIT CAR	RD NUMBER				
EXPIRY DATE			CSC		
RECEIPT NU	JMBER 18-19-		DATE		
					_

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
<u>Liability Waiver and Release Form - It is understood and agreed, as a</u>
condition of participation in skating programs offered by Medicine $\operatorname{\sf Hat}$
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

the Medicine Hat Skating Club. \_\_\_\_\_Initials

Medicine Hat Skating Club \_\_\_\_\_Initials

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

Refund Policy - Please check our website for full details. \_\_\_\_\_Initials

Email Legislation - YES I would like to be added to the email list for the

Sun	May- Monday	May- Tuesday	May- Wednesday	May- Thursday	May- Friday	May- Saturday
		1 <mark>NO SKATING</mark>	2	NO SKATING	4	5
6	7	4:00-4:45 PreCanSkate/CanSkate	9	5:15-6:00 PreCanSkate/CanSkate	11	12
13	14	6:45-7:30 PreCanSkate/CanSkate	16	6:45-7:30 PreCanSkate/CanSkate	18	19
20	21	4:00-4:45 PreCanSkate/CanSkate	23	5:15-6:00 PreCanSkate/CanSkate	25	26
27	28	6:45-7:30 PreCanSkate/CanSkate	30	6:45-7:30 PreCanSkate/CanSkate		

Sun	June- Monday	June- Tuesday	June- Wednesday	June- Thursday	June- Friday	June- Saturday
					1	2
3	4	4:00-4:45 PreCanSkate/CanSkate	6	4:00-4:45 PreCanSkate/CanSkate	6:00-7:00 On ice bring a friend party	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30