



PRECANSKATE/CANSKATE 2018-2019

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.

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. **Skaters MUST have a helmet with face mask and mittens.**

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.

Skaters MUST have a helmet and mittens.

ACCELERATED PreCan/CanSkate: Same as above except runs twice a week from October to December and you can register again if wish for January to March.

Where to go from here: There are 2 paths you can choose. They can branch out into Stargroup, which is the beginner figure skating program. They can also move into the CanPower program which helps prepare skaters for hockey, ringette or refereeing.

Communication: Office is located in the FLC right by the ice surface. Our door has our name on it. Most communication is done through email, if you are not receiving emails and would like to, make sure to contact the club to resolve this issue.

Skater's Information				
Name:	M or F:	Birth Date:	mm/dd/yyyy	
Previous Level passed if known/or describe current skating skill ability:				
Parent/Guardian Information				
Father:		Mother:		
Address:		City:		
Postal Code:		Phone Number:		
E-Mail:				
CLASS OPTIONS (option 1 Oct-Dec) (option2 Jan-March) (option 3 Oct to March)				
PreCanSkate	Monday	4:15- 4:45pm	FLC	
Circle 1	Monday	6:30-7:00pm	FLC	
	Thursday	5:00-5:30pm	FLC	\$135.00
	Saturday	9:30-10:00am	FLC	\$240.00
CanSkate	Monday	4:00- 4:45pm	FLC	
Circle 1	Monday	6:15-7:00pm	FLC	\$135.00
	Thursday	4:45-5:30pm	FLC	\$240.00
	Saturday	9:15-10:00am	FLC	
ACCELERATED TWICE A WEEK OPTION (option 1 Oct-Dec) (option2 Jan-March) (option 3 Oct to March)				
PreCanSkate	20 sessions in 10 weeks		Option 1 or 2	Option 3
Circle your 2 days	Monday(4:15-4:45), Monday (6:30-7:00), Thursday, Saturday		\$240.00	\$420.00
CanSkate	20 sessions in 10 weeks		\$240.00	\$420.00
Circle your 2 days	Monday (4:00-4:45), Monday (6:15-7:00), Thursday, Saturday			
FUNDRAISING- per family not per skater -This is a mandatory fee. ALL money goes to ice rental costs. The ice rental fee has gone up twice in the last 2 years, as has the Skate Canada Membership fee. We have chosen to not increase registration fees and hope to offset the increase slightly through fundraising.				
OPTION 1	-receive a book of tickets per family due at registration (as you sell your tickets you keep the money to recoup your \$100 back)			\$100.00 OR
OPTION 2	-Fundraiser buy out option due at registration per family (no selling tickets)			\$75.00
If numbers do not permit classes may be canceled on short notice. We will do our best to fit you into a different class if this does occur.	Program Fee			
	Discount *3 skaters in 1 family			-15%
	Sub Total			\$
	Fundraising Fee			\$
	Skate Canada Membership (runs Sept 1-Aug31)			\$33.00
TOTAL			\$	

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, Facebook, YouTube 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 IN FULL			
PAID BY:	CASH	CHEQUE#	BURSARY\$
VISA Auth#		MC Auth#	
CARDHOLDER NAME:			
CREDIT CARD NUMBER			
EXPIRY DATE		CSC	
FUNDRAISING 50/50 \$100.00		CHQ#	Visa/MC
OR FUNDRAISING Buy Out \$75.00		CHQ#	Visa/MC
RECEIPT NUMBER 18-19-		DATE	

PAYMENT PLAN – Split into 2 equal payments		
1st PAYMENT Oct 1, 2018 PAID BY:		
CASH	CHQ#	VISA/MC
FINAL PAYMENT Jan 1, 2019 PAID BY:		
Postdated CHQ#	VISA/MC	