



SARATOGA SPRINGS FIGURE SKATING CLUB

Join us for Fall Learn to Skate! Sundays 5:00-6:00 pm

at the Vernon Ice Rink 30 Weibel Avenue Saratoga Springs, NY 12866

5:00 pm Sunday Winter Session 1: 1/6, 1/13, 1/20, 1/27, 2/3, 2/10

5:00 pm Sunday Winter Session 2: 2/17, 2/24, 3/3, 3/10, 3/17, 3/24

Skater's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M F

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Previous Skating Level/Experience: (check all that apply)

- no experience, some experience, Skated in LTS Program, I can skate forward, I can do forward crossovers, I can do backward crossovers

Please check class choice (s) below:

(Final class assignment determined by coach)

First class \$90

(includes 1/2 hr group lesson and 1/2 hr practice ice)

Each additional class \$63

Special Offer! Adult Learn to Skate \$75

Table with 2 columns: Class Choice, Checkbox. Rows: Basic Skills, Advanced Skills/Free Skate, Learn-to-Dance\*, Learn-to-Synchro\*, Adult LTS

Special Offer! Sign up for Winter Sessions I & II and save \$10!

NOTES: Six Week Session

Need based financial assistance available through Christopher Dailey foundation inquire for details.

There will be no makeups or refunds for missed classes

\*These lessons open to all skaters Basic 3/4 and up

Table with 2 columns: Item, Price. Rows: 1st Lesson, 2nd Lesson, Adult LTS Special Offer, Session I & II Discount, TOTAL

Authorization for Medical Treatment: Primary Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Known allergy/special condition: \_\_\_\_\_ Medications now being taken: \_\_\_\_\_

I do hereby appoint the Saratoga Springs Figure Skating Club to act on my behalf in authorizing unexpected medical, dental, surgical care, and hospitalization for my minor child and myself.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Photo Waiver: The SSFSC Learn to Skate USA program has my permission to use my child's photograph publicly to promote their programs. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's signature: \_\_\_\_\_ Date \_\_\_\_\_

How did you hear about SSFSC Learn to Skate USA Program? Website, Flyer, Friend/Family, Other

Contact: Bart Bergbom, ice@saratogaspringsfsc.info Payment by check made payable to Saratoga Springs Figure Skating Club Please send application (and check if applicable) to: LTS, 23 Lincoln Ave Glens Falls NY 12801 or email to ice@saratogaspringsfsc.info For more information and to find credit card payment links, go to www.SaratogaLearnToSkate.com