



**2018 Winter
REGISTRATION FORM**

Name of Skater _____

Date of Birth _____ Sex: M F

Address _____

City _____ Postal Code _____

Phone _____ email _____

Home Club _____ Skate Canada # _____

Badge working on _____

I want to enroll in (please circle your choice):

CanSkate: Sunday A B C D

AdultSkate Thursday

I the undersigned, understand that the South Windsor Skating Club, its Coaches, Board Members and designates are not responsible for injuries incurred while the above member is participating in any club activity.

I understand the use of a hockey helmet is required for participation in all CanSkate sessions.

I the undersigned, give the SWSC permission to photograph/video my child while participating in one of our programs for promotional or educational purposes:

Signature: _____

Date: _____

Registration Fee \$ _____

Less Family Discount \$ _____

TOTAL \$ _____

Cash \$ _____

Credit card _____

Cheque \$ # _____

\$ # _____

Please make Cheques payable to: S.W.S.C.

CanSkate

Sundays Jan. 7 – Mar. 18

- A 3:25-4:10, 5 and 6 yr beginners**
- B 4:10-4:55, 7 yrs & up beginners**
- C 5:05-5:50, returning skaters working on stage 2**
- D 5:50-6:35 returning skaters working on stage 3 - 6**

\$225

Includes \$35 Skate Canada Fee 10% discount on 2nd or more skaters

PLEASE NOTE NO ICE

Mar.4

AdultSkate

Thursday Jan. 11 – March 22

8:15pm – 9:15pm

\$225

Includes \$35 Skate Canada Fee
20% discount for parents of skater enrolled in a program

PLEASE NOTE NO ICE

Mar. 15

South Windsor Skating Club

2017/2018

Official Receipt

Name Of Skater _____ birth date _____

Name of Parent or Guardian _____

Session Registered for _____

Date _____ Amount _____

Official's Signature _____

***Please keep this receipt for your 2017 taxes,
\$25 will be charged for additional copies***