



# Glen Cairn Skating Club

## CanSkate/PreSchool 2011-2012

Jack Charron Arena, 10 McKittrick Dr. / Bell SENSplex, 1565 Maple Grove Rd.



### REGISTRATION INFORMATION:

Wednesday sessions are held at the Bell Sensplex.  
Saturday sessions are held at the Jack Charron Arena

For more information:

- go to [www.glencairnsc.ca](http://www.glencairnsc.ca)
- e-mail to [gccscanskate@gmail.com](mailto:gccscanskate@gmail.com)

Mail to:

Glen Cairn Skating Club  
c/o 25 Nortoba Crescent  
Kanata, ON K2T 1G9

### SKATER INFORMATION

|                                      |      |              |                    |                                     |
|--------------------------------------|------|--------------|--------------------|-------------------------------------|
| First Name:                          |      |              |                    |                                     |
| Last Name:                           |      |              |                    |                                     |
| Gender: (please circle)              | Male | Female       | Age:               | Date of Birth (day/month/year): / / |
| Address:                             |      |              |                    |                                     |
| City:                                |      | Postal Code: |                    |                                     |
| Skate Canada Number (if known):      |      |              | Last Badge Passed: |                                     |
| Allergies or other Medical Concerns: |      |              |                    |                                     |
|                                      |      |              |                    |                                     |

### CONTACT INFORMATION

|                                    |             |              |
|------------------------------------|-------------|--------------|
| Parent or Guardian's Name:         |             |              |
|                                    | First Name  | Last Name    |
| Address (if different than above): |             |              |
| City:                              |             | Postal Code: |
| Home Phone:                        | Work Phone: | Other:       |
| E-mail Address: (mandatory)        |             |              |
| (Please print clearly.)            |             |              |

30/10/11

**Sessions** (please select from the following):

**PreSchool** (ages 3-5 approx.)

|   |             |                     |
|---|-------------|---------------------|
| Fall - Saturdays<br>Oct. 1 - Dec. 17                                      | 9 - 9:30am  | \$118 (11 sessions) |
|   | 9:30 - 10am |                     |
| Winter - Saturdays<br>Jan. 7 - March 31                                   | 9 - 9:30am  | \$118 (11 sessions) |
|   | 9:30 - 10am |                     |
| Both Fall & Winter<br>(15% discount if registered for both by Nov. 26/11) | 9 - 9:30am  | \$200 (22 sessions) |
|   | 9:30 - 10am |                     |

Wednesdays Oct. 5/11 - March 28/12 OR  
Saturdays Oct. 1/11 - March 31/12

**CanSkate - 1 Day Programs**

|                                    |            |                     |
|------------------------------------|------------|---------------------|
| <b>CanSkate 1 (Badges 1, 2, 3)</b> |            |                     |
| Wednesdays                         | 6 - 6:50pm | \$333 (23 sessions) |
| Saturdays                          | 10-10:50am | \$318 (22 sessions) |
| <b>CanSkate 2 (Badges 3, 4, 5)</b> |            |                     |
| Wednesdays                         | 7 - 7:50pm | \$333 (23 sessions) |
| Saturdays                          | 11-11:50am | \$318 (22 sessions) |
| <b>CanSkate 3 (Badges 5, 6, 7)</b> |            |                     |
| Wednesdays                         | 7 - 7:50pm | \$333 (23 sessions) |
| Saturdays                          | 11-11:50am | \$318 (22 sessions) |

**CanSkate - 2 Day Programs** (times and dates as above)

|                   |                |                     |
|-------------------|----------------|---------------------|
| <b>CanSkate 1</b> | (15% discount) | \$553 (45 sessions) |
| <b>CanSkate 2</b> | (15% discount) | \$553 (45 sessions) |
| <b>CanSkate 3</b> | (15% discount) | \$553 (45 sessions) |

|   |         |
|---|---------|
| PROGRAM COST  |         |
| LESS 5% IF 3 OR MORE SKATERS IN FAMILY                            | -       |
| SUBTOTAL  |         |
| SKATE CANADA FEE (non-refundable)                                 | \$32.00 |
| FUNDRAISING (per skater max 2 skaters per family, non-refundable) | \$25.00 |
| TOTAL FEES PAYABLE  |         |

**CSA Approved Hockey or Snowboarding helmets are mandatory for all CanSkaters up to and including Badge 5.**

Please read and initial beside each point:

- \_\_\_\_\_ 1. I hereby authorize the Glen Cairn Skating Club to use my child's name and/or photograph in newspapers, on the Club's arena bulletin board, trophies, programs, newsletters, and on the Club's website.
- \_\_\_\_\_ 2. I understand that my child will not be able to participate in any Glen Cairn Skating club programs until such time as all fees are paid as set out on this form.
- \_\_\_\_\_ 3. I understand that a \$25 fee will be charged for cheques returned from the bank for any reason.
- \_\_\_\_\_ 4. **Cancellation Policy:** I understand that refunds will only be granted prior to October 31, 2011, and will be pro-rated and subject to a \$25 administration fee. After this date, only written requests for refunds for medical reasons will be considered, provided that the request is accompanied by a valid medical certificate (eg. Doctor's letter).
- \_\_\_\_\_ 5. I understand that each member must fulfill their fundraising obligation. This fee is **not** refundable.
- \_\_\_\_\_ 6. I hereby agree that the Glen Cairn Skating Club, its proprietors, coaches and volunteers will not be held responsible for any injury, accident or loss, however caused, and also agree to release the aforementioned from all claims

Signature of parent or guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Print name: \_\_\_\_\_

Relationship to Skater: \_\_\_\_\_

**PAYMENTS** (by cheque or money order please)

Total Fees Payable dated at time of registration

**OR**

2 cheques or money orders payable as follows:

50% of Total Fees dated at time of registration

50% of Total Fees dated Dec. 1, 2011

**\*\*One set of cheques per skater please\*\***

|  |
|--|
| Cheques/money orders to be made payable to the<br><b>"Glen Cairn Skating Club"</b><br>Please record skater's name on front of cheques. |
|--|

|  |
|--|
| OFFICE USE ONLY<br>Name on Cheque _____<br>Cheque # _____ \$ _____ Date: _____<br><br>Name on Cheque _____<br>Cheque # _____ \$ _____ Date: _____<br><br>Registrar _____ Treasurer _____ |
|--|