



Leamington Skating Club
P.O.Box 551
Leamington, Ontario N8H 3X4
Phone: (519) 325-0606

2007-2008 Registration Form - Fall/Winter Session - September 8,2007 thru April 5,2008

Skaters Info:

Last Name:		First Name:		Male	Female
Address:		City:	Postal Code:	Phone #:	
Email:		Birthdate:		Parent/Guardian Name:	
Skate Canada #:		Coach's Name:		Home Club:	
Highest Test Passed:		Badge:	Freeskate:	Dance:	Skills:

Session Info:	Circle Skate Day:	Cost per Session:	Subtotal:
Precanskate	Tuesday Saturday	\$ 125.00	
Canskate	Tuesday Saturday	\$ 225.00	
PreJunior	Tuesday Saturday	\$ 225.00	
TeenSkate	Saturday	\$ 225.00	
Junior	Tuesday Thursday Sunday	\$ 175.00	
Intermediate	Tuesday Thursday Sunday	\$ 175.00	
Senior	Tuesday Thursday Sunday	\$ 175.00	
Open Session	Saturday	\$ 175.00	
Group Artistic/Dance/Skills-14wks	Sunday (must purchase 1 other session)	\$ 225.00	

Please make cheque(s) payable to **Leamington Skating Club**
 \$30 NSF fee will be charged on all returned cheques. Minimum 50% payment due upon registration, 50% postdated to Oct.15,2007. No refunds after Oct.15,2007 unless accompanied by a medical certificate. A \$25 handling fee will be charged on all refunds. Late fee \$50 for all registrations rec'd after August30,2007.
 Trial period for Precanskate & Canskate is 3 wks from start of season.

10% discount for 3rd session	
15% discount for 4th session	
50% off lowest reg'n 3rd family member+	
Skate Canada Membership Fee	\$ 30.00
LSC Administration Fee	
Total Due:	

Circle Payment Type:	Cash	Cheque	Visa	M/C
Total Received:				Cheque #
Total PostDated:				Cheque #

Waiver: The applicant or guardian agree to release responsibility in favour of the Town of Leamington, the Leamington Skating Club, volunteers, sponsors, program assistants, club professionals and the arena staff for any injury or accident by any person while participating in, coming to, or going from the skating school or related functions. The LSC Board reserves the right to limit skaters per session, reduce hours, change times/dates based on registration numbers. LSC also reserves the right to adjust a skater's session based on their skill level.

Will you be participating in Carnival? YES NO
 Are you interested in being a Program Assistant? YES NO
 Are you a current LSC Member? YES NO

 (Parent/Guardian Signature)

LSC Office Use Only - Date Rec'd: _____ **Rec'd by:** _____

Top copy for LSC, Bottom copy to be retained by skater for receipt purposes.