



RISING STARS

INTRODUCTION TO FIGURE SKATING

*This class is the next step in pursuing the sport of figure skating!
Advanced figure skating instruction & Competition Preparation for beginner level skaters.*


Basic 6/7 MUST BE COMPLETED TO GRADUATE INTO THIS PROGRAM

	<u>Dates</u>	<u>Time</u>	<u>Rink</u>	<u>Cost</u>
Session 1: Sunday:	October 10, 17, 24, 31	9:00 – 9:45am	Leisure Rinks	\$54/4
Session 2: Sunday:	November 14, 21, 28, December 5, 12	9:00 – 9:45am	Leisure Rinks	\$67/5
Session 3: Sunday:	January 2, 9, 23, 30, February 13, 20, 27 <i>*No Class Jan 16 and Feb 6</i>	9:00 - 9:45am	Leisure Rinks	\$94/7

(A yearly fee of \$20.00 payable to Skate Great is also required. This includes a skating manual & membership to the USFS)

Visit us on the web at: www.sk8gr8.com

RISING STARS Sunday 2021-2022

Registration Form - RISING STARS Make check or money order payable to:  Skate Great P.O. Box 67, Cheektowaga NY 14225	
LEISURE RINKS 75 Weiss Road Orchard Park, NY 14127	HOLIDAY TWIN RINKS 3465 Broadway Cheektowaga, NY 14227
Children 6 and under are encouraged to wear an ice safe helmet	

Name

Address City Zip

Phone Male/Female Birthdate

E-mail (*discounts & email confirmation) Badge Level

Member of USFS: YES / NO If no, required USFS Annual Charge of \$20.00 (Valid July 1st – June 30th)

Session 1 (Oct 10-Oct 31): _____ Session 2 (Nov 14-Dec 12): _____ Session 3 (Jan 2-Feb 27)* _____
 \$54/4 weeks \$67/5 weeks \$94/7 weeks *No Class Jan 16 and Feb 6

Total Amount Paid: _____ Check# _____

Please check if this box if you would like to receive text alerts for cancellations, updates, etc. Cell # _____

As a parent or guardian of this student, I hereby consent to the use of photographs/videotape taken during the course of the session for publicity, promotional and/or educational purposes (including publications, presentation or broadcast via newspaper, internet or other media sources). I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

___Yes, I give consent for Skate Great to use photographs my child. ___No, I do not authorize Skate Great to use any photographs of my child.

Parent Signature _____ Date: _____

Skate Great assumes no responsibility for any accident or injury to any participant. No Refunds / Exchanges. \$50.00 fee for all returned checks.