



ST. ALBERT SKATING CENTRE LEARN-TO-SKATE REGISTRATION FORM

Last Name		First Name		
Date of Birth (M/D/Y)		Email Address: (will be used for notices throughout the year)		
Phone #: (Home)		(Other)		
Address: Street		City		Postal Code
AB Health #				
<p>Waiver: I accept full financial responsibility for this application form. Further, I agree to abide by the Rules and Regulations of Skate Canada and the St. Albert Skating Centre (SASC) as set down by the Board of Directors. I agree that the SASC and/or their Directors and Coaches will not be held responsible for any accident or loss, however caused, and damages which may arise from such accident or loss.</p>				
<p>Freedom of Information: I hereby consent for my child to be photographed and that my child's name or photograph may be used in club newsletters or on the SASC website.</p>				
<p>Cancellation/Refund Policy effective June 1, 2009: 14 days before 1st class: Full refund 0-14 days before 1st class- Full refund less \$25 Administration fee 0-8 days after 1st class- Full refund less \$25 Administration fee and \$30.80 Skate Canada Fee* 8 or more days after 1st class- <u>No refund available for any reason. Family credit only with doctor's note (credit expires in 12 months from issuing date.)</u></p>				
This is to certify that the above information is correct and I agree to abide by the rules and regulation of the SASC.				
Signature:			Date:	
SESSION	Days Skating	TIME	SC Reg. Fee*	Total
September				
January				
April				
July				

The Skate Canada Registration Fee of \$30.80 is due once a year beginning on September 1st of every year

How did you hear of our CanSkate program? _____

Office Use Only:

Payment Date	Amount Received	Cash OR Cheque #	Total Owing	Receipt Number	Received By: