



**Stratford Skating Club (SSC) and NSSA Inc.  
Spring School 2018, Registration Form**



April 9<sup>th</sup>, 2018 – May 31<sup>st</sup>, 2018

Complete all sections of the form and send with payment to NSSA Inc, 102 Well St, Stratford, ON N5A 4M1.

[www.stratfordskating.ca](http://www.stratfordskating.ca)

[e-mail--stratfordskating@gmail.com](mailto:e-mail--stratfordskating@gmail.com)

**All post-dated cheques must accompany this form to be processed.**

SKATER INFORMATION			
Skater's First Name:		Skater's Last Name:	
Birth date (dd/mm/yyyy):	Age:	Sex: M	F
Street address:	City:	Postal Code:	
Home Phone Number:	Skate Canada # (if known):		
Please indicate home skating club if other than Stratford Skating Club:			

PARENT / GUARDIAN #1 NAME:		
Primary Phone #:	Secondary Phone #:	Email Address:
PARENT / GUARDIAN #2: (IF CONTACT INFORMATION IS DIFFERENT FROM THAT ABOVE)		
Primary Phone #:	Secondary Phone #:	Email Address:

EMERGENCY CONTACT INFORMATION	
Provide the name of an alternate contact in the event that a parent/guardian cannot be reached	
Name:	Phone #:

**Preschool Registrants only:** If you wish to use a pair of skates for *free* for the session, please fill out shoe size below.

Please check out [stratfordskating.ca](http://stratfordskating.ca) for further information.

Running Shoe Size:
--------------------

Please provide SSC/NSSA with any pertinent medical conditions that the SSC/NSSA and the coaching staff should be aware of:

EXPECTATIONS/WAIVER
---------------------

Skaters in **all programs** are asked to participate in an optional fundraising campaign.

I give my permission for the use of my name/my child's name and photographs to the NSSA/SSC for any of their present or future publications: i.e. Newspaper articles, website and other promotional materials.

Yes    or     No

It is understood and agreed that Northern Star Skating Academy/ Stratford SC, Skate Canada and the City of Stratford shall not be liable for injury or loss occasioned by the member while traveling to or participating in skating practices, competitions, or other activities, nor shall they be responsible for any damages or losses caused by the member during the same time. The member and/or members parent(s)/legal guardian agrees to indemnify the NSSA/SSC, Skate Canada and the City of Stratford and hold it harmless from any claims or demands in respect of such loss or damage.

Applicant hereby waves all claims, rights or causes of action against the NSSA/SSC, its officers, directors, coaches and members for personal injury or loss of property of any nature, however or wherever sustained.

\_\_\_\_\_  
Signature of skater or parent/guardian

\_\_\_\_\_  
Date

# SSC and NSSA Inc. 2018 SPRING SESSION

Please indicate desired program and days.

Program	Skating Day <small>(Please check desired days)</small>	Skating Time*	Start Date	End Date	Cost of Program <small>(Inc. HST)</small>
Preschool	<input type="checkbox"/> Monday ^, **	5:30-6:00 pm	9-Apr-18	28-May-18	1 day/wk-\$115
	<input type="checkbox"/> Tuesday	5:50-6:20 pm	10-Apr-18	29-May-18	2 day/wk-\$165
Canskate <small>(Adult CanSkate session will run alongside Monday Canskate session)</small>	<input type="checkbox"/> Monday ^, **	5:30-6:20 pm	9-Apr-18	28-May-18	1 day/wk-\$185
	<input type="checkbox"/> Tuesday	5:50-6:40 pm	10-Apr-18	29-May-18	2 day/wk-\$235
Intro to Figure Skating	<input type="checkbox"/> Monday	7:00-8:20 am	9-Apr-18	28-May-18	2 day/wk-\$285
	<input type="checkbox"/> Tuesday	4:30-5:30 pm	10-Apr-18	29-May-18	3 day/wk-\$335
	<input type="checkbox"/> Thursday	5:00-6:00 pm	12-Apr-18	31-May-18	
Intermediate	<input type="checkbox"/> Monday	7:00-8:20 am	9-Apr-18	28-May-18	2 day/wk-\$360
	<input type="checkbox"/> Tuesday	4:30-5:50 pm	10-Apr-18	29-May-18	3 day/wk-\$400
	<input type="checkbox"/> Thursday	5:15-6:35 pm	12-Apr-18	31-May-18	
Senior	<input type="checkbox"/> Monday	7:00-8:20 am	9-Apr-18	28-May-18	2 day/wk-\$360
	<input type="checkbox"/> Tuesday	6:50-8:20 pm	10-Apr-18	29-May-18	3 day/wk-\$400
	<input type="checkbox"/> Thursday	6:20-7:50 pm	12-Apr-18	31-May-18	

\*Ice times are scheduled based on enrolment in prior years and are subject to change based on final enrolment numbers. A program may be cancelled if there is not sufficient demand to ensure viability of the program.

\*Registration will be processed upon receipt of completed form and payment.

\*The SSC and NSSA Inc. cannot guarantee make up sessions for sessions cancelled due to inclement weather or facility issues.

\***CSA certified hockey helmets (NOT bike helmets), are MANDATORY for all Canskate and Preschool members.**

\***Refunds** - are subject to the Skate Canada fee and an administration fee and will only be given automatically to Preschool members on or before the 2<sup>nd</sup> skating week.

Refunds will not be given after the registration deadline without receipt of a medical note for all other programs.

\*Please see calendar for arenas where programs are offered.

\*NSSA Inc. will be holding a voluntary Fundraising campaign during Spring School.

^Monday April 9<sup>th</sup> and Monday April 16<sup>th</sup> —Preschool 5:00-5:30pm, Canskate 5:00-5:50pm

\*\* Monday Preschool/Canskate sessions on May 21 are cancelled, and will take place on Tuesday May 22nd, due to Victoria Day weekend.

Total Program Fee	\$ _____
If Skate Canada Fee (Sept. 1 <sup>st</sup> -Aug. 31 <sup>st</sup> ) is already paid, do not add this fee.	\$36.00
<b>Total Registration Fee</b>	<b>\$ _____</b>

**Please make cheques payable to NSSA Inc – NSF Cheques will be subject to a \$35.00 processing fee.  
HST is included in all fees. HST #80388 2174 RT001**

**When submitting registration, please make sure to include registration form,  
AND full payment including all post-dated cheques.**

**PAYMENT OPTIONS:**

Preschool & Canskate - 1st cheque for \$75 and remaining fees to be paid April 15, 2018.

Intro/Junior/Senior - 1st cheque for \$135 and remaining fees to be paid in up to 2 equal installments.

OFFICE USE ONLY	DATE	Amount
Cash		
Cheque #1	# _____ (Day of Registration)	\$ _____
Cheque #2	# _____ Apr 15, 2018	\$ _____
Cheque #3	# _____ May 1, 2018	\$ _____

**Reviewed By:** \_\_\_\_\_

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