



**Stratford SC / Northern Star SA Inc.  
Stratford North Stars Synchro  
Winter Session 2026 – 2027 Registration Form**



**WINTER SEPTEMBER 12, 2026 – MARCH 27, 2027**

Complete all sections of the form and send with payment to NSSA, 102 Well St, Stratford, ON. N5A 4M1.  
**All post-dated cheques must accompany this form to be processed.**

**SKATER INFORMATION**

(Please Print Clearly)

|                                                                |                            |                                                                                              |  |
|----------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------|--|
| Skater's First Name:                                           |                            | Skater's Last Name:                                                                          |  |
| Birth date (dd/mm/yyyy):                                       | Age:                       | Gender: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Other |  |
| Address:                                                       | City:                      | Postal Code:                                                                                 |  |
| Primary Phone #:                                               | Skate Canada # (if known): |                                                                                              |  |
| Please indicate home Skating Club if other than Stratford SC : |                            |                                                                                              |  |

**Parent / Guardian Names:**

|           |                           |                |
|-----------|---------------------------|----------------|
| Phone #1: | Phone #2 (if applicable): | Email Address: |
|           |                           |                |

**EMERGENCY CONTACT INFORMATION- name of an alternate contact in the event that a parent/guardian cannot be reached**

|       |          |
|-------|----------|
| NAME: | PHONE #: |
|       |          |

Please provide us with any pertinent medical conditions that the Academy and/or coaching staff should be aware of:

---

**EXPECTATIONS/WAIVER**

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

# STRATFORD NORTH STARS SYNCRO WINTER SESSION 2026/27

| Program                     | Skating Day                              | Skating Time*   | Synchro Program Fee |
|-----------------------------|------------------------------------------|-----------------|---------------------|
| Intro to Syncro<br>(star 4) | <input type="checkbox"/> Saturday on ice | 9:15 – 10:00 am | \$500               |

\*Intro to Syncro session will run from Saturday September 12, 2026 to Saturday March 27, 2027 (24 weeks).  
 \*Ice times are scheduled based on enrolment in prior years and are subject to change based on final enrolment numbers. SSC/NSSA reserves the right to change/cancel any program for which there is not sufficient paid registration.  
 \*No refunds will be given after receipt of registration without supporting medical documentation.  
 \*Fees include all ice time, and coaching fees for all sessions (including competition coaching). **They do not include competition registration fees or dress fees.**  
 \*Schedule subject to change.

|                                                                                                         |           |
|---------------------------------------------------------------------------------------------------------|-----------|
| <b>Total Program Fee:</b> from chart above                                                              | \$ _____  |
| <b>Out of Town Fee– Fig. Skate</b> (if applicable, and not already paid with another SSC session) +\$75 | +\$ _____ |
| <b>Total Registration Fee</b>                                                                           | \$ _____  |

**Please make cheques payable to NSSA Inc. (Etransfers not accepted)** - NSF cheques subject to a \$35.00 fee.  
**Skate Canada Insurance and HST are included in all fees.** HST #80388 2174 RT001

**PAYMENT OPTIONS (All post-dated cheques must accompany this form to be processed):**

**Syncro** - 1st cheque for half of total registration fee and remaining half of fees in one post dated cheque – (date of registration, and June 15, 2026).

**\*\*Please note, other post-dated cheques may be accepted upon request\*\***

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

**Regular Session will run September 12/26 thru March 27/28 at the Allman Arena.  
 On ice from 9:15-10:00am. (All times are subject to change)**