Northern Star Skating Academy Inc.
In St. Marys
Spring 2027, Registration Form
April 9th – May 21st, 2027 (7 Sessions)

Complete all sections of the form and send with payment to NSSA, 102 Well St, Stratford, ON N5A 4M1.
www.stratfordskating.ca 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:	Gender: M F Other
Street address:	City:	Postal Code:
Home Phone Number:	Cell Number:	Email Address:
Skate Canada # (if known):		
Please indicate home skating club if other than Northern Star Skating Academy Inc:		

Parent/Guardian Names:

Phone Number:	Cell Number:	Email Address:

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 for further information.

Running Shoe Size:

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

_____

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

NAME:	PHONE #:

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.

O Yes or O No

It is understood and agreed that Northern Star Skating Academy, Skate Canada and the Town of St. Marys 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 member's parent(s)/legal guardian agrees to indemnify the NSSA/SSC, Skate Canada and the Town of St. Marys and hold it blameless 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

NSSA Inc. In St. Marys 2027 Spring Session

Please indicate desired program and days.

Program	Skating Day (Please check desired days)	Skating Time*	Spring Program Program Fee (7 wks)
Preschool	□ Friday	5:30-6:00 pm	$115 + $68 (insurance) = $183
Canskate	□ Friday	6:00-6:50 pm	$170 + $68 (insurance) = $238

*Ice times are scheduled based on enrolment 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 NSSA 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 2nd skating week.

Refunds will not be given after the registration deadline without receipt of a medical note for all other programs. An admin fee will be charged on all refunds.

***All sessions will be held at St. Marys Pyramid Complex.**

*NSSA Inc. may hold a Fundraising campaign during these sessions.

*All fees include $68 Skate Canada insurance fee.

Total Program Fee $ _____

If Skate Canada Fee (Sept. 1st, 2026-Aug. 31st, 2027) is already paid, do not add insurance +$ _____

Total Registration Fee $ _____

Registration Deadline: March 25th, 2027

All programming will be finalized after these dates.

Registrations after this date will be accepted if space permits.

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:

All programs - 1st cheque for half of program fees and remaining half to be paid April 15, 2027.

OFFICE USE ONLY		DATE	Amount
Cash			
Cheque #1	#	(Day of Registration)	$
Cheque #2	#	April 15, 2027	$

Reviewed By: _____ **Date:** _____