# 2011/2012 REGISTRATION

# PRECANSKATE

SKATECANADA

Caledonia Skating Club

☐ Monday 6:00 - 6:30

☐ Tuesday 6:00-6:30 ☐ Tuesday 6:30 - 7:00

☐ Saturday 11:30 - 12:00 ☐ Saturday 12:00 - 12:30

**Skater's Name:** _____ (First) _____ (Last) **M F** Circle One

**Address:** _____

**Postal Code:** _____ **Home Phone #:** (  ) _____

**Date of Birth:** ___ / ___ / ___ (Day / Month / Year) **Health Card #:** _____ optional

**E-mail Address:** _____

**Name of Parents/Guardians:** _____

**Emergency Contact (other than parent):** _____ **Phone #** _____

**Any medical concerns?:** _____

**CSC Returning Member** _____ Skate Canada # **Other Club** _____ Skate Canada #

**Any previous skating experience** _____

## FEES

| | | |
|---|---|---|
| $90 10 weeks (Oct. - Dec) or (Jan. - Mar.) | Annual Fee (from column at left) | $ _____ |
| $160 20 weeks (Oct. - Mar) | Skate Canada Membership Fee | $ 32.00 |
| | Carnival Fee | $ 10.00 |
| | 50/25/25 Tickets | $ 50.00 |
| | TOTAL OWING | $ _____ |

***In order to keep registration fees low, we require every family to sell a book ($50) of 50/25/25 tickets.***

**PAYMENT OPTIONS**

*Paid in Full* ☐ Cash ☐ Cheque

*Post Dated Cheques with a $50 non-refundable deposit* $50 Cash Cheque

Post dated payment amount

_____ Sept. 15/11

_____ Oct. 15/11

_____ Nov. 15/11

_____ Dec.15/11

_____
Parent/Guardian

_____
CSC Executive