

www.hilltopskatingclub.com Tel. (905) 895-1700 ext. 406 Email: info@hilltopskatingclub.com

2018-2019 Rising STAR SKATE Program Registration (blease brint)

	(piease print)	44/5/19	
Skater's Name		MIDIY BIRTHDATE	
	Province		
	Mother Cell ()		
Skate Canada #	Home Club	(if not Hilltop)	
program. Skaters will have a ful afternoon from 4:30-5:30. Off-lot The program runs from Septer Recreation Complex and the and Friday from 6:30 – 8:00 am Semove to Pickering College Are The morning program moves back and times). The Wednesday prostarting on Wednesday, September Starting on Wednesday, September 1:30-5:30.	are progressing through the CanSkate ly structured program on Tuesday are training will be provided each day plember 11, 2018 to May 15, 2019 a Pickering College Arena. Morning extember 11, 2018 until October 26, 2018 until Actober 26, 2018 until Cana starting on October 30, 2018 until to Magna Centre on April 2, 2019 ogram will be at the Stronach Auroier 12 to October 24. There will be not the Pickering College Arena from	and Friday mornings, and us a one hour group lesson at Magna Centre, Strong skate will be at Magna Cello18 (ticket ice). The morn I March 8, 2019 (same days until May 14, 2019 (ticket ica Recreation Complex o lesson on Wednesday, October 14.	wednesday n on the ice. ach Aurora ntre on Tuesday ning program will s and times). ice, same days at 4:30-5:30 ctober 31. The
		TALLY	FEES HERE
	l Friday 6:30 – 8:00am, Wednesday 4:		5
2 Session Option	Friday 6:30 – 8:00am, Wednesday 4:	30 – 5:50 pm \$252. \$1900	5
2 Session Option EARLY BIRD DISCOUNT - \$ Mandatory, SKATE CAI	, , , , , , , , , , , , , , , , , , ,	30 – 5:50 pm \$252: \$1900 - \$ rating year*) \$	5
2 Session Option EARLY BIRD DISCOUNT - \$ Mandatory, SKATE CAI	NADA FEE (paid only once per skration Fee** (paid only once per skration Fee**)	30 – 5:50 pm \$252: \$1900 - \$ rating year*) \$	36.00 30.00
2 Session Option EARLY BIRD DISCOUNT - \$ Mandatory, SKATE CAI Administr	NADA FEE (paid only once per skration Fee** (paid only once per skration Fee**)	30 – 5:50 pm \$252 \$1900 - \$	36.00 30.00
Skating year runs from Septers Skater Awards, Club Celeb	NADA FEE (paid only once per skration Fee** (paid only once per s TOTAL	30 – 5:50 pm \$252. \$1900 - \$	5 0 36.00 30.00
*Skating year runs from Septe ** Skater Awards, Club Celeb Note that payment can be split in 2019.	NADA FEE (paid only once per skration Fee** (paid only once per skration Fee** (paid only once per stration Fee** (paid o	30 – 5:50 pm \$252. \$1900 - \$ (ating year*) \$ (kating year) \$ FEES = \$ Administration (stration and the remainder)	5 0 36.00 30.00





"Hilltop Skating Club" 2018-2019 Rising STAR SKATE Program WAIVER & TERMS

I/WE ACKNOWLEDGE THE TERMS OF HILLTOP 2018-2019 Rising STAR SKATE PROGRAM

I/we confirm permission for me/my/our child to participate fully in all session activities. I/we understand that there are inherent risks in connection with the sport of figure skating. I/we hereby assume these risks; waive any possible claim that may arise against Hilltop Skating Club, Pickering College, and its employees for any damages or injuries sustained in the course of the sport or otherwise. I/we agree to indemnify and hold harmless Hilltop Skating Club, Pickering College, and its employees, for any such damages or injuries, which arise in connection with myself/my or our child's use of the ice arenas or the facilities. The Ice Programs Manager has the right to dismiss a skater without refund, who in his/her opinion is a hazard to the safety or rights of others.

DATE:	
Participant/Parent Signature if less than 18 yrs	Print Name
Hilltop will not issue any refunds for missed or administration in these circumstances. If a refund	Rising STAR SKATE Program REFUND POLICY cancelled sessions. Hilltop credit may be offered at the discretion of the list necessary for injury/illness, the duration of the injury/illness must be at least be made promptly, in writing to Hilltop and be accompanied by a medical crative fee.
I/WE ACKNOWLEDGE THE REFUND PO	DLICY -
Parent/Guardian Signature if under 18	
The skater hereby consents to the use of his or letelevision or radio program, video/DVD, photogr	Rising STAR Program PUBLICITY WAIVER ther name, photograph, biography and likeness on or in connection with any raphy, print media or the advertising and publicizing of such programs as may ating Club and waives all rights to remuneration or otherwise in connection
I/WE CONSENT TO THE PUBLICITY PO	DLICY -
Parent/Guardian Signature if under 18	
	Itop Skating Club of Newmarket reach our goal of providing the best ering some of your time for events, for fundraising, or for helping w.
Yes, I am interested in volunteering some	of my time for the Hilltop Skating Club. Please contact me.
Skaters are encouraged to	participate in social and fundraising activities for

The Hilltop Skating Club of Newmarket

Skating Program Coordinator, Allie Biederman, <u>abiederman@pickeringcollege.on.ca</u>
Email completed application to <u>info@hilltopskatingclub.com</u>

