

North Toronto Skating Club

North Toronto Memorial Arena
174 Orchard View Blvd, Toronto, ON, M4R 1C3

2019/20 Registration Form

Learn to Skate

As of July 31, 2019

www.northtorontoskating.com
northtorontoskatingclub@gmail.com

Skater Name _____ Skate Canada # _____ Date of Birth (dd/mm/yy) _____

Parent/Guardian Name _____

Address _____ City _____ Postal code _____

Phone _____ Alternate Phone _____ OHIP # _____

Emergency contact and phone _____

I agree to receive club news, information, updates and notices by email Yes No Email _____

Current Home Club _____ Previous Home Club (if applicable) _____

Highest CanSkate Badge PASSED _____

Monday	Tuesday	Wednesday	Thursday	Friday	Early Bird Price (Until Oct 31st)
Age 3 - 4 Parent & Tot 30 minutes (Must be accompanied by a parent/guardian who is a competent skater) <i>Starts Sep 23/19</i> For insurance coverage purposes, the parent/guardian who signs up must attend each week. NO SUBSTITUTIONS!					
<input type="checkbox"/> 1:40 - 2:10pm					1 Session Membership \$ 474
Age 3 - 5 CanSkate A 30 minutes <i>Starts Sep 20/19</i>					
<input type="checkbox"/> 2:10 - 2:40pm	<input type="checkbox"/> 4:00 - 4:30pm <input type="checkbox"/> 4:30 - 5:00pm	<input type="checkbox"/> 4:00 - 4:30pm <input type="checkbox"/> 4:30 - 5:00pm	<input type="checkbox"/> 5:00 - 5:30pm <input type="checkbox"/> 5:30 - 6:00pm	<input type="checkbox"/> 5:15 - 5:45pm <input type="checkbox"/> 5:45 - 6:15pm <input type="checkbox"/> 6:15 - 6:45pm <input type="checkbox"/> 6:45 - 7:15pm	1 Session Membership \$ 574 2 Session Membership \$ 918
Age 6 - 9 CanSkate B 60 minutes (Skaters under 6 who have passed CanSkate Level 1 can take this class) <i>Starts Sep 20/19</i>					
	<input type="checkbox"/> 4:00 - 5:00pm	<input type="checkbox"/> 4:00 - 5:00pm	<input type="checkbox"/> 5:00 - 6:00pm	<input type="checkbox"/> 5:15 - 6:15pm <input type="checkbox"/> 6:15 - 7:15pm	1 Session Membership \$ 679 2 Session Membership \$ 1086
Age 10 - 17 IntroSkate 60 minutes <i>Starts Sep 5/19</i>					
			<input type="checkbox"/> 6:10 - 7:10pm	<input type="checkbox"/> 4:15 - 5:15pm	1 Session Membership \$ 710 2 Session Membership \$ 1136
Paid each year per skater..... Annual Skate Canada Membership \$ 40 Paid each year for parent/guardian helping skater on ice... Annual Skate Canada Membership PARENT & TOT ONLY \$ 40 For skaters new to our club (lifetime membership)..... New Membership Fee \$ 20 Parent/guardian helping skater on ice (lifetime membership)..... New Membership Fee PARENT & TOT ONLY \$ 20 Large lockers fit a Zucca bag plus a backpack or duffle..... Locker Rental Sep - May (Optional) \$ 40					
TOTAL FEE ENCLOSED \$ _____					

Parent & Tot ONLY - Parent/Guardian attending class (NO SUBSTITUTIONS due to Insurance Coverage)

Name _____ Date of Birth (dd/mm/yy) _____ (Must be 18 or older)

Please Note The Early Bird price is a discounted price held until October 31st.

Starting November 1st program prices are prorated depending on the number of remaining sessions in your chosen time slot and in some cases *may be higher than the Early Bird price.*

Date (dd/mm/yy) _____ Signature _____ **NO REFUND AFTER Program Start Date**

Complete and sign both pages of this form and mail with your CHEQUE to:

NORTH TORONTO SKATING CLUB
174 Orchard View Blvd, Toronto, Ontario M4R 1C3

Policies and Waivers

<p>Refund Policy</p> <ul style="list-style-type: none"> The Skate Canada Membership fee is non-refundable once submitted to Skate Canada. All other fees are fully refundable up to the program start date listed for each program. No refunds after the program start date except for medical reasons. Please contact the office to process a refund. 	<p>Initials _____</p>
<p>Liability Waiver</p> <p>In consideration of the use of the facility of the North Toronto Skating Club, it is clearly understood that the North Toronto Skating Club and/or its Board of Directors, Agents, Coaches, Employees and Volunteers, will not be held responsible for any accident, or loss, however caused, and that the applicant agrees to release the said club, its Board and the proprietors from all liability, claims and damages which may arise as a result of such accident or loss.</p>	<p>Initials _____</p>
<p>Media Release</p> <p>I grant permission to North Toronto Skating Club to use my image (including photographs, video and/or audio) for use in North Toronto Skating Club publications including videos, email blasts, recruiting brochures and newsletters and to use my image in electronic versions of the same publications or on the North Toronto Skating Club website or other electronic forms of media.</p> <p>I hereby waive any right to inspect or approve the finished images or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the image.</p>	<p>I Accept the Media Release</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Initials _____</p>
<p>Session Requirements</p> <p>Parent & Tot</p> <ul style="list-style-type: none"> ALL child skaters are required to wear CSA Approved helmets. It is highly recommended that the parent/guardian attending with the child wear a CSA approved helmet to participate in these sessions. Only the parent/guardian who has signed up and paid the Annual Skate Canada Membership fee can attend the class with the skater. NO SUBSTITUTIONS due to Insurance Coverage. <p>CanSkate ALL skaters are required to wear CSA Approved helmets.</p> <p>IntroSkate It is highly recommended that skaters wear a CSA approved helmet to participate in these sessions.</p>	<p>Initials _____</p>
<p>Volunteer Policy</p> <p>I understand the club depends on members to contribute their time to help out with day to day activities, test days and special events.</p> <p>I commit to volunteer a minimum of one hour of my time or the time of a family member to the club as needed.</p> <p>You will be contacted by email to fulfill your volunteer commitment.</p>	<p>Initials _____</p>

Date (dd/mm/yy) _____ Skater Name _____

Parent/Guardian Name _____

Parent/Guardian Signature _____

**Complete and sign both pages of this form and mail with your CHEQUE to:
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