



NIAGARA CENTRE SKATING CLUB
 P.O. BOX 595, WELLAND, ONTARIO L3B 5R3
2019 SPRING SCHOOL REGISTRATION FORM

Skater Name :		Parent Name :	
New ____	Returning ____	M : ____ F : ____	Health Card # :
Address :		Postal Code :	
Email :		Phone # :	
Birthdate : year____, month____, day ____		Home Club :	

Please circle your choice:

Day	Session	Location	Time
Monday	CanSkate	Pelham	5 :35pm – 6 :20pm
	PrePower	Pelham	5 :35pm – 6 :20pm
	Teen/Adult	Pelham	5 :35pm – 6 :20pm
Saturday	CanSkate	Pelham	11:05pm – 11:50pm
	StarGroup	Pelham	11:05pm – 11:50pm
Please indicate your interest Hockey stream ____ Figure Skating Stream ____			

One Day package \$200 new skaters or \$160 for current NCSC Members

Two-day package \$325 new skaters or \$285 for current NCSC Members

Monday session runs from March 18th to May 20th, 2019

Saturday session runs from March 23rd to May 25th, 2019

I _____ (parent/guardian), consent to _____ (skater's name) participating in the activities of the Niagara Centre Skating Club and hereby release and forever discharge the Niagara Centre Skating Club and its agents, being all coaches, directors, officers, volunteers, members, staff, successors and / or assignees of and from all claims, damages, actions or causes of action arising by reason of the participation of _____ (skaters name) in skating or other club activities and from all claims or demands whatsoever in the law or in equity which I, my heir, executors, administrators or assignees can, shall or may have because of participation. The Niagara Centre Skating Club also reserves the right to change dates and times due to unforeseen circumstances and there will be no refunds for missed sessions. Any requests for refunds are subject to Board approval and are subject to a \$75 administration fee.

Signature of Parent or Guardian _____
 Date

Amount Paid: _____

Payment Method: _____