

The Sheryl Franks Creative Skating Academy - sponsored by the Skating Club of Boston

REGISTRATION 2010-2011

Mail completed registration with payment to :

Sheryl Franks, PO Box 95153, Newton, MA. 02459

Please make checks payable to : **"Skating Club of Boston"**

In person registration/payment :

At the Fessenden School/Coffin Sports Center

250 Waltham Street, West Newton, MA. 02465

Learn To Skate (ages 4 & up)
Sunday's : 1:00 – 2:50 pm _____

Tot's Classes (ages 3-5)
Wednesday's : 1:00 – 2:00 pm _____

USFSA Basic Skills Registration # _____

Creative Skating Academy Phone : 617-699-4736

School Attending _____

Skater's Name: _____ **M** _____ **F** _____ **AGE:** _____ **DOB:** _____

Parent/Guardian's Name: _____

Home Address : **Number :** _____ **Street :** _____

City/Town : _____ **State :** _____ **Zip :** _____

Home Phone : - - _____ **Cell Phone:** - - _____

Work Phone : - - _____ **Email :** _____

Emergency Contact Name & Phone : _____

Please list any Basic Skills or Learn to Skate Program the Skater has participated in : _____

What Level did the Skater complete : **Tots :** 1 _____ 2 _____ 3 _____ **Hockey:** 1 _____ 2 _____ 3 _____

Basic Skills: 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 _____ **Free:** 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 _____

(FOR STAFF ONLY)

	Sunday Session I <small>09/12/10-11/21/10</small>	Sunday Session II <small>11/28/10-02/06/11</small>	Sunday Session III <small>02/13/10-04/17/11</small>	Wednesday Session II <small>11/03/10 – 1/05/11</small>	Wednesday Session III <small>1/12/11 – 3/16/11</small>
Tuition \$200.00					
Sibling Disc.					
*Reg. Fee \$25.00					
Amt. Paid					
CK Amt					
CK Date					
CK #					
Balance Due					

Please make checks payable : Skating Club of Boston

* Registration Fee includes : USFSA Booklet, All Basic Skills Test Badges & Insurance. Annual registration fee required for each skater.

NOTES:

-OVER – (sign & date page back)

SECTION 1: Sign up for the session that you wish to participate in by checking the options on the registration page. **All payments are due at the time of sign-up.** You have the choice of registering for multiple sessions at the start of Session I to guarantee your space or you may register prior to each session during the two-week registration period before each session begins. Some details:

1. The cost for each ten-week session is \$200.00. Multiple child/family discount is 5% off for each additional skater, with one full paid tuition. Walk on fee \$25/session, child/family discount does not apply for walk-on skaters.
2. An annual US Figure Skating Basic Skills Membership fee of \$25.00 is required for each student.
3. All classes are from 1:00 p.m. – 2:50 p.m. on Sunday's, held at the Fessenden Rink.
4. Applications are accepted on a space-available basis. Group sizes are limited. Instructors, under the direction of Sheryl Franks will determine the appropriate level for each skater to begin in. One (1) 30 minute class will be designated by Level between 1:00 p.m.-2:50 p.m. Remaining ice time to be used as practice ice.
5. The last three-weeks of each ten-week session are "show-off" and/or "ice show" days. Children will be asked to show their instructors the skills they have learned, in order for a determination to be made for the child's level for the next ten-week session.
6. We welcome all skaters age 4 and up. Skaters under age 7 and beginners of all ages are required to wear helmets.
7. There are no credits, transfers or make-up classes for missed lessons due to absenteeism. No make-up classes for cancellations due to inclement weather.

SECTION 2: Waiver & Release of Liability :

In consideration of being allowed to participate in any skating or related activities at The Sheryl Franks Creative Skating Academy at the Fessenden School in Newton, MA. Or elsewhere sponsored by The Sheryl Franks Creative Skating Academy, the undersigned acknowledges, appreciates, and agrees that :

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist; and,
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for the participation. If however any unusual or significant hazard appears during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest academy representative immediately; and,
4. I, for myself and on behalf of my heirs, personal representatives, and next of kin, hereby release and hold harmless The Sheryl Franks Creative Skating Academy, its officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event namely The Fessenden School, ("Releases") with respect to any and all injuries, disability, death, or loss or damage to person or property, whether arising from the negligence of the releases or otherwise.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without inducement.

For Participants of Minority Age : (Under age 18 at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above all the releases, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the releases from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, even if arising from their negligence.

Parent/Guardian's Signature : _____ **Date :** _____

Photo Release Waiver : This is to certify that as Parent/Guardian with legal responsibility do consent to usage of photographs for advertisement and article purposes in regards to The Sheryl Franks Creative Skating Academy, without compensation for said photo's.

Parent/Guardian's Signature : _____ **Date :** _____