TOTS

For beginners, ages 3 yrs and up with skaters grouped according to age and ability in a 8 to 10-week session.

Day: MONDAY MORNINGS
Term: November 15 – January 17
Ten (10) weeks
Time: 10:20 – 11:20 am
Cost: $150 per person

Day: TUESDAY AFTERNOONS
Term: November 16 – January 18
Ten (10) weeks
Time: 1:10 – 2:10 pm
Cost: $150 per person

Day: THURSDAYS
Term: November 18 – January 20
Off Nov 25th
Nine (9) weeks
Time: Mornings 10:20 – 11:20 am or
Afternoons 1:10 – 2:10 pm
Cost: $135 per person

Day: FRIDAYS
Term: November 19 – January 21
Eight (8) weeks
Off Nov 26 + Dec 24
Time: 3:50 – 4:50 pm or
5:00 – 6:00 pm
Cost: $153 per person

Day: FRIDAY EVENINGS
Term: November 19 – January 21
Eight (8) weeks
Off Dec 24, 31
Time: 5:00 – 6:00 pm / 6:10 – 7:10 pm*
*6:10pm start on Dec 3, Jan 7, 14, 21
Cost: $136 per person
Creative Skating Available

Day: SATURDAY MORNINGS
Term: November 20 – January 22
Eight (8) weeks
Off Dec 25, Jan 1
Time: 11:00 am – 12:00 pm
Cost: $136 per person
Creative Skating Available

Day: SUNDAY EVENINGS
Term: November 21 – January 23
Off Jan 2
Nine (9) weeks
Time: 3:50 – 4:50 pm or
5:00 – 6:00 pm
Cost: $153 per person

PRIVATE LESSONS
If you are interested in private or semi-private skating lessons, please call one of our Co-Directors to discuss your options.
Call Andrea or Arlene (978) 684-7203.

BASIC SKILLS

This program provides basic ice skating instruction, focused on building skills, creating confidence and having fun. Skaters are grouped according to age and ability – adults & kids in a 8-10-week session.

Day: FRIDAY EVENINGS
Term: November 19 – January 21
Eight (8) weeks
Off Dec 24, 31
Time: 5:00 – 6:00 pm / 6:10 – 7:10 pm*
*6:10pm start on Dec 3, Jan 7, 14, 21
Cost: $136 per person
Creative Skating Available

Day: SATURDAY MORNINGS
Term: November 20 – January 22
Eight (8) weeks
Off Dec 25, Jan 1
Time: 11:00 am – 12:00 pm
Cost: $136 per person
Creative Skating Available

Day: SUNDAY EVENINGS
Term: November 21 – January 23
Off Jan 2
Nine (9) weeks
Time: 3:50 – 4:50 pm or
5:00 – 6:00 pm
Cost: $153 per person

Winter I 2021 REGISTRATION FORM

Registrant’s Name __________________________________________ Email ________________________________
Street __________________________________________ City __________________________ State ______ Zip ______
Home Phone __________________________________________ Daytime Phone ________________________________
Gender: Male ☐ Female ☐ Date of Birth __________________________
Parent/Guardian’s Name __________________________ Current Badge Level ______
How did you hear about our programs? ____________________________________________________________

PROGRAM (Please CIRCLE your preferred time)

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<tr>
<th>TIME</th>
<th>AMOUNT</th>
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<tbody>
<tr>
<td>Tots Lessons</td>
<td>Mondays 10:20 am</td>
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<td>Thursdays 10:20 am</td>
<td>Thursdays 1:10 pm</td>
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<td>Fridays 10:20 am</td>
<td>Fridays 1:10 pm</td>
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<tr>
<td>Basic Skills</td>
<td>Fridays 5:00 pm</td>
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<td>Sundays 3:50 pm</td>
<td>Sundays 5:00 pm</td>
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TOTAL - __________

Release of Liability
I am aware that the hazards of ice skating may include serious injury to bones, joints, ligaments, muscles, tendons and other parts of the muscular skeletal system; and serious injury or impairment to organs and other parts of my body, with impact on my health and general well being. I am/ my child is physically able to participate in the activities of this program and is covered by health insurance, as identified on this registration form. In consideration of the Academy permitting me to register for this program, I hereby voluntarily assume all risks associated with participation in this program and agree to hold harmless the Academy, its agents, trustees, officers, and employees from any and all liability, claims, causes of action or demands of any kind and any nature whatsoever which may arise from or in conjunction with my participation in this program, except in the event of gross negligence. The terms of this Agreement shall serve as a release and assumption of risk for me and all members of my family listed on this application.

Signature (Parent/Guardian, if under 18 years of age) __________________________ Date __________

METHOD OF PAYMENT

Cash ☐ Check #________ Amount Received: __________
Credit Card ☐ Amount Charged: __________
Visa ☐ MC ☐ Card # __________ Expires __________