**TOTS**

For beginners, ages 3 yrs and up with skaters grouped according to age and ability in a 7 to 8 – week session.

Day: **MONDAY MORNINGS**  
Term: November 27 – January 22  
(Off Dec 25, Jan 1)  
Seven (7) weeks  
Time: 10:20 – 11:20 am  
Cost: $133 per person

Day: **TUESDAY AFTERNOONS**  
Term: November 28 – January 23  
(Off Dec 26)  
Eight (8) weeks  
Time: 1:10 – 2:10 pm  
Cost: $152 per person

Day: **THURSDAYS**  
Term: November 30 – January 25  
(Off Dec 28)  
Eight (8) weeks  
Time: Mornings 10:20 – 11:20 am or  
Afternoons 1:10 – 2:10 pm  
Cost: $152 per person

Day: **FRIDAYS**  
Term: December 1 – January 26  
(Off Dec 29)  
Seven (7) weeks  
Time: Mornings 10:20 – 11:20 am or  
Afternoons 1:10 – 2:10 pm  
Cost: $152 per person  

**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 – kids only in a 7 to 8 week session.

Day: **FRIDAY EVENINGS**  
Term: December 1 – January 26 (Off Dec 29)  
Eight (8) weeks  
Time: 6:30 – 7:10pm (Dec 1, Jan 5,12)  
5:00 – 6:00 pm (Dec 15, 22 Jan 19,26)  
Cost: $176 per person

**Creative Skating Fridays**

December 1 – January 26 (Off Dec 29)  
6:10 – 7:10pm/ 5:00 – 6:00 pm $200

**Skater Development Saturdays**

- Off-ice Conditioning 10:50 – 11:50 am $80  
- Rising Stars 12:00 pm – 1:00 pm $224

Day: **SATURDAY MORNINGS**  
Term: December 2 – January 27 (Off Dec 30)  
Eight (8) weeks  
Time: 10:50 – 11:50 am  
Cost: $176 per person

Day: **SUNDAY EVENINGS**  
Term: December 3 – January 28 (Off Dec 24, 31)  
Seven (7) weeks  
Time: 5:00 – 6:00 pm or  
6:10 – 7:10 pm  
Cost: $154 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.

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**Winter I 2023 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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<td>Tot Lessons</td>
<td>Mondays 10:20 am</td>
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<td>Basic Skills</td>
<td>Fridays 5:00/6:10pm</td>
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<td>Basic Skills</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**

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Visa     MC     Card # ___________________________ Expires __________________
I hereby authorize Phillips Academy to charge my credit card the amount listed above.______________________________

Cardholder Signature