



PARENT & TOT

Fall 2010 & Winter 2011 Registration Form

SKATE CANADA
PARENT

SKATE CANADA
SKATER

OFFICE
REGISTRATION

1. Proof of age is required for all **new** members (health card, birth certificate or passport).
2. A form is required for each skater/child.
3. ALL applicable information **MUST** be completed (including phone number & e-mail).
4. The release **MUST** be signed by a parent and/or legal guardian.
5. Cheque, cash or debit for the full amount **MUST** be submitted with this registration form.

PLEASE PRINT – THIS PORTION MUST BE COMPLETED IN FULL

Sex: Male Female

Last Name: _____

Date of Birth: Month _____ Day _____ Year _____ Initial _____

First Name: _____ Middle Initial: _____

Did you skate with KWSC in the past year? **Yes No**

Address: _____

If yes, which season(s)? (Please Circle)

Summer 2010 Spring 2010 Fall/Winter 2009-2010

City: _____ Postal Code: _____

Did you register in a KWSC pre-season program

Email: _____

in September 2010? **Yes No**

Phone: _____

Medical and/or Special Needs Information

Please detail any medical, learning or physical condition(s). Example: hearing disorder, vision impairment, ADD/ADHD, asthma.

Please contact Membership Services (519-886-5972 ext 221) to communicate any specific instructions to help us provide a positive program experience.

Please
Initial
Here:

RELEASE FORM – MUST BE SIGNED BY PARENT OR LEGAL GUARDIAN IF UNDER 18

1. Members and parents or legal guardians of members agree to hold KWSC, its Officers and Directors and their heirs and assigns, **free and blameless of any damage, accident or injury** which may occur to the member while participating in skating lessons, fitness classes, exhibitions, carnivals, competitions, tests, and traveling to or from such sessions, exhibitions, carnivals or tests.
2. The skater understands that he/she is responsible for ensuring his/her personal safety on the skating sessions. The skater will not enter onto the ice surface without first identifying a Club Professional Coach in attendance at the ice area.
3. The undersigned acknowledges that they have read and agree to abide by the policies and procedures as outlined in the "Financial Information" section of the Recreational Brochure, including the KWSC Refund Policy.
4. The undersigned gives consent for KWSC coaches and trainers to seek medical advice from either Waterloo Sports Medicine Center with regards to the skater's injury. Prior to any medical treatment administered approval from Parent/Legal Guardian will be obtained.

(PIPEDA) Personal Information Protection and Electronic Documents Act - The Kitchener Waterloo Skating Club would like to assure you that any information collected regarding the enrolment and payment for you or your family members will be kept private and confidential, and used only for its intended purposes. All information will be stored in a secure manner in accordance with the Personal Information and Electronic Documents Act.

The Kitchener Waterloo Skating Club at no time will sell, lend or give your personal information to any group or person. This includes List Brokers, Mail Orders, Businesses, Telemarketers or other companies who would use it to sell their services or products.

Please Note: If you have completed any application for you and your family or anyone else you represent your representation implies you have obtained consent from them, even though they may not be present during the application process, for the Identified Purposes.

Name (Please Print) _____

Signature _____

Date _____

PARENT AND TOT PROGRAM

In order to register for this program, tots must be 2 years of age by October 1, 2010 for the Fall program and January 1, 2011 for the Winter program. The accompanying adult is required to pay the \$31.00 Skate Canada Membership Fee for insurance purposes; therefore the same adult must accompany the tot each week. The accompanying adult must have competent skating abilities and must be able to assist the tot throughout the lesson.

Days Offered	Time	Location	Fall	Winter	Choice
Monday	5:30 pm – 6:15 pm	RIM: Optimist	Oct 18/10 – Dec 13/10	Jan 3/11 – Mar 7/11	x
Tuesday	6:00 pm – 6:45 pm	RIM Park: Lions	Oct 19/10 – Dec 14/10	Jan 11/11 – Mar 8/11	SOLD OUT
Saturday	11:00 am – 11:45 am	Lions Kitchener	Oct 16/10 – Dec 11/10	Jan 8/11 – Mar 5/11	SOLD OUT
Sunday	12:45 – 1:30pm	RIM Park: CFSC		Jan 9/ 11- Mar 6/11	x

Fall Session: \$98.00

9 weeks

Winter Session: \$98.00

9 weeks

Fall & Winter: \$196.00

18 weeks

Accompanying Adult information (must be 18 years of age or older):

Last Name: _____ First Name: _____

Phone Number: _____ Date of Birth: Month _____ Day _____ Year _____

Signature: _____

PUBLICITY CONSENT

It is the desire of the Kitchener-Waterloo Skating Club to use our skaters' photographs, interviews and videos to promote their skating successes on our website, as well as through media releases for television, newspapers and Skate Canada.

Consent: I (parent or guardian) give permission to the KWSC to publish _____ (print skater's name) name and/or photograph for the purpose of Club advertisement and promotion. I (parent or guardian) am aware that these names and/or photographs may be used on the club's website or sent to the media. I (parent or guardian) understand the nature and purpose of this consent. This consent will remain in effect from Sept 1/10 – Aug 31/11.

Signature: _____ (parent or guardian if under 18) **Date:** _____

As a courtesy, if you have chosen not to give your permission, the skater should excuse themselves when group photos are being taken.

FEES

1. Program Fee: \$ _____

2. Skate Canada Fee: \$ **31.00** for skater

*This fee is required to be paid with this registration form unless you skated in a September 2010 pre-season program.
This fee is paid once per membership year (Sept 1/10 – Aug 31/11).*

3. Skate Canada Fee: \$ **31.00** for accompanying adult

This fee is paid once per membership year (Sept 1/10 – Aug 31/11).

Total Amount Remitted: \$ _____