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| Skate Canada Colour Logo | **Hamilton Skating Club****Recreational Registration Form****SPRING 2019****Monday, April 8, 2019 to Sunday, June 9, 2019** CANSKATE, CanPower TeenSkate/Adult Learn To Skate Sessions | coloured logo-NEW.jpg |

Please Print in BLOCK LETTERS \*Information Requested by Skate Canada and/or is required for Insurance Purposes and Income Tax Receipts

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| Skater Information |
| Last Name\* | First Name\* | Gender [ ]  Male [ ]  Female | Birth Date (YYYY/MM/DD)\* \_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ / \_\_\_\_ \_\_\_\_ / \_\_\_\_ \_\_\_ |
| Address  | Apt. / Unit  | Home Phone # (required)( )  | Mobile (Cell) #( ) |
| City  | Postal Code **(required)** | Medical Conditions (especially Severe Allergies)/ Special Needs [ ]  No [ ] Yes Specify:  |
| **Name of (Primary) Parent / Guardian Information for skaters under 18 years old**  | **Emergency Contact (or Other Parent)** |
| Name | Name |
|  | Email Address\*(required) | Home Phone # \* (required)( ) |  |
| Relationship to Skater[ ]  Mother [ ]  Father [ ] Guardian [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Relationship to Skater[ ]  Mother [ ]  Father [ ] Guardian [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Skate Canada Membership Information  |
| Skate Canada #  | Last CanSkate Badge # Received | Private Coach (if Applicable) |
| **Membership Status** Please state the last club that your child was registered with as of Sept. 2018: [ ]  Hamilton Skating Club [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  **Existing Member** – The skater’s Skate Canada membership is with Hamilton Skating Club. \*\* If the skater also goes to another club, HSC may not be your home club. [ ]  **New Member** – You are a new skater if you have not previously taken lessons with a Skate Canada Affiliated Club. \*Skate Canada Fee must be paid |
| Session Registration |
| **Session** | **Please select**  |  |
| **PreSchool/PRECanSKATE (Ages 4-5)** | [ ]  Sat 10:00 am – 10:30 am |  $150.00 |
| **PreSchool/PRECanSKATE (Ages 4-5)** | [ ]  Sun 10:15 am – 10:45 am |  $150.00 |
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| **CanSkate**  *\*Ages 5 – 10* |  | **SPRING 2019:****Monday, April 8, 2019 to Sunday, June 9, 2019** |
| Canskate Stages 1 – 6 |  | [ ]  Monday 5:30 pm – 6:10 pm $165.00 |
| Canskate Stages 1 – 3 |  | [ ]  Tues 6:15 pm – 6:55 pm $215.00 |
| Canskate Stage 4-6; **&** GroupSTAR 1-3 |  | [ ]  Tues 7:00 pm – 7:45 pm $215.00 |
| Canskate Stages 1 – 6 |  | [ ]  Friday 5:30 pm – 6:10 pm $190.00 |
| Canskate Stages 1 – 3Canskate Stages 4 - 6 |  | [ ]  Sat 10:45 am – 11:25am $190.00[ ]  Sat 11:30 am – 12:15pm $190.00 |
|  |
| TeenSkate / Adult Skate  |  | [ ]  Sat 11:30 pm – 12:15 pm $190.00 |
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| Canskate Stage 4-6; **&** GroupSTAR 1-3 |  | [ ]  Sun 9:30 am – 10:10 am $190.00 |
| Canskate Stages 1 – 3 |  | [ ]  Sun 11:00 am – 11:40 am $190.00 |
| CanPowerSkate |  | [ ]  Sun 11:45 am – 12:30 pm $190.00 |

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|  | SubTOTAL  |  |
| Administration Fee : Spring 2019 | + $25 |
| Skate Canada Fee (Sept 1 – Aug 30) includes Safe Sport fee\*Renewed every September | + $40 (if not paid in fall/winter) |
| **Total** |  |

Continues on page 2 *(turn over)*

PLEASE sign reverse

**Debit, Cash or Cheques made Payable to “Hamilton Skating Club”**

**Confirmations will not be sent out. No refunds.**

PLEASE NOTE: Pricing reflects statutory holidays. No makeup sessions for statutory or personal holidays. Applications must be completed in full. Payment for the full

amount must accompany the form. Incomplete application forms will not be accepted. **NSF cheques** are subject to a $40.00 administration fee and are to be replaced

by certified cheque, money order, debit or cash.

**RELEASE**

Having read the brochure and listed terms and conditions, I hereby release the Hamilton Skating Club (HSC), its Directors, Officers and Coaches from any and all

claims, actions, causes of actions, and damages resulting from personal injury, theft, accidents including those occurring while using the jumping harness or exercise

or other loss however caused. I verify that the above information is true and correct to the best of my knowledge. I have read and agree to the Parent/Skater Code of

Conduct and have discussed it with my child.

**[ ]  Yes [ ]  No** The skater/parent/guardian, hereby acknowledges and consents to the use of the skater’s name, biography and likeness on or in connection with

any television or radio program, video/DVD, print media or the advertising and publicizing of such program as may be designated by Hamilton Skating Club and

waives all rights to remuneration or otherwise in connection with the above. If you have any concerns please see the office.

**[ ]  Yes** **[ ]  No** I would like to receive information on the Hamilton Skating Club by Email.

Signature of Parent / Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTICE OF COLLECTION STATEMENT

Your privacy and the protection of your personal information is important to us. Your personal information is required to register you with Skate Canada in any capacity, including,

without limitation, as a Skate Canada registrant, coach or in connection with your affiliation with a skating club or skating school and to administer various services, such as Skate

Canada events. Your personal information may also be exchanged with Skate Canada affiliates, which includes your local skating club or skating school or provincial association or

section. By submitting this form, you expressly provide your consent to the sharing of your personal information with Skate Canada and as described herein for purposes of registration

nd receipt of national services delivered by Skate Canada. We adopt the 10 Fair Information Principles into our privacy program and employ reasonable measures to protect against

unauthorized access, processing, disclosure, alteration, destruction or loss of your personal information. See Skate Canada Privacy Policy for more details.

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| **Office Use Only** |
| Payee |
| **Cheque # / Debit Date Amount** |
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| **Comments:**  |