

Fall 2016

**Program:** Pre-Novice & higher; Junior Silver SS & Higher 5 Week Program - September 6 - October 11, 2016

				<u> </u>			
Name					Skate Canada #		
Address		City			Province Postal Code		
Telephone: ( )		Birthdate: Month		thdate: Month	Day Year		
Home Club:	Home Club #			Email Address:			
Champions Training Centre Coach					Cell Number:		
Part A: Package Informa	ntion <sup>.</sup>						
Number of lessons per week	Technica	al		Choreography	Dance	Skill	
Part B: Tentative Sched			Ses		Please circle		
Hespeler Arena	7:00am - 8:00am - G					day	
Part C: Tentative Sched	lule				,	,	
		na (that		Tuesday Pac	kana: Preston Aud	litorium	
Please Note: All programs are sold as daily package {that Tuesday Package: Preston Audit   includes ice & all off ice classes}. No partial programs are 3:30pm - 4:15pm - General Session							<u> </u>
				4:15pm - 4:30pm - Stroking Class			
Monday Package: Hespeler Arena				4:40pm - 5:25pm - General Session # 4			
3:30pm - 5:00pm - General Session # 2				5:30pm - 6:30pm - Fitness Class			
5:10pm - 6:10pm - Fitness Class				6:30pm - 7:15pm - Flexibility Class			
					nckage: Hespeler Arena		
					5pm - General Session # 2		
4:45pm - 5:00pm - Stroking Class				4:45pm - 5:00pm - Stroking Class			
5:10pm - 6:10pm - Fitness Class				5:10pm - 5:55pm - Fitness Class			
				6:00pm - 6:45	pm - Flexibility Clas	S	
Friday Package: Preston Auditorium Saturday Package					ckage: Preston Auditorium		
3:50pm - 5:20pm - General Session # 3				10:10am - 11:40am - General Session # 1			
5:20pm - 5:35pm - Stroking Class				11:40am - 11:55am - Stroking Class			
5:40pm - 6:40pm - Fitness Class		1					1
Part D:	Day			Discount	Regular		
Session Selections:	Requested			Fee	Fee	Total	
Morning Sessions (Tues Wed or Fri)	-		@	\$103.00			—
Monday Package			@	\$137.86	\$154.40	\$	
Tuesday Package			@	\$185.22	\$207.45	\$	_
Wednesday Package			@	\$143.50			
Thursday Package			@	\$165.99		•	
Friday Package			@	\$162.73			
Saturday Package			@	\$140.23	\$157.06	Ş	
Make Cheques Payable to: Cham	pions Tra	aining Cer	ntre		Sub Total	\$	
					HST (13 %)	\$	
Mail to: 6 - 425 Hespeler Road, Suite # 322					Total	\$	
Cambridge, ON, N1R 8J6					50% Deposit	-	
Phone: 519-624-4532, Email: info@skatectc.com					July 20, 2016		
					Balance		
With signing this form, you provide auth	August 10, 2016						

I, the undersigned, accept full financial responsibility for this application form. I understand that there will be no refunds of deposits or due balances after the deadline dates. I agree that Huston, Wheeler & Wheeler Skating Schools (KLFSS Inc). will not be held responsible for any accidents or loss, however caused and agree to release indemnity and save harmless the Huston, Wheeler & Wheeler Skating Schools (KLFSS Inc). from all damage or claims as a result of such accidents or loss.