



# Fall School 2019

## Accelerated Program

Office Use Only:

Date Received/Time:

September 3 - October 7, 2019

Name		
Address		
City	Province	Postal Code
Telephone #	Work #	
Email address	Skate Canada #	

### Part A: Package Information

On a weekly basis this program is offered on two or three days.  
 Continuous movement on the ice - 50 minute session  
 Skater to coach Ratio: 4 or 7 skaters to one coach

### Part B: Tentative Schedule

All Classes held at Preston Aud.

Please "X" the sessions you will be attending.

<b>Tuesday Package Includes:</b> 6:10pm - 7:00pm
6:10pm - 6:25pm - Stroking Class
6:25pm - 7:00pm - Skating Session

<b>Wednesday Package Includes:</b> 6:15pm - 7:05pm
6:15pm - 6:50pm - Skating Session
6:50pm - 7:05pm - Stroking Class

<b>Saturday Package Includes:</b> 1:10pm - 2:00pm
1:10pm - 1:25pm - Stroking Class
1:25pm - 2:00pm - Skating Session

1 to 2 private lessons per week are recommended.  
 However not necessary for participation in the accelerated program.

Please identify how many lessons per week you request:

Insurance Policy: All skaters participating in the above programs are required to purchase insurance. The annual fee (Sept to Aug) is \$ 43.00. If you register your child for the fall program, you will not be required to purchase the insurance again with the winter registration form (if it is a sanction skating club. ie: Preston FSC)

<u>Part C:</u>	<i>Day Requested</i>		<i>Discount Fee</i>	<i>Regular Fee</i>	<i>Total</i>
Tuesday Package		@	\$119.82	\$141.39	\$
Wednesday Package		@	\$119.82	\$141.39	\$
Saturday Package		@	\$119.82	\$141.39	\$
Skate Canada Insurance		@	\$43.00	\$43.00	\$

**Please review packages and if you have any questions about the packages or require other options, contact the CTC office @ 519-624-4532**

Make Cheques Payable to: Champions Training Centre  
 Mail to: 6 - 425 Hespeler Road, Suite # 322

Cambridge, ON, N1R 8J6

Phone: 519-624-4532, Email: info@skatectc.com

<b>Sub Total</b>	\$
<b>HST (13%)</b>	\$
<b>Total</b>	\$

**50% Deposit  
 July 12, 2019**

**Balance  
 August 12, 2019**

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.

\_\_\_\_\_  
 Must be signed by parent, guardian or skaters (18 yrs of age or over)