



#1000351

Dundas Figure Skating Club

P.O. Box 65553 Dundas, Ontario L9H 6Y6

Phone/Fax: 905-628-4008

www.dundasfsc.ca



PLEASE PRINT and use ONE application per skater

Name of Skater:	F M	Birth Date:
Mailing Address:		Skate Canada # NEW
City:	Postal Code:	Highest Badge Passed:
Telephone #		Emergency phone #:
Parents/Guardian Name:		e-mail Address:
Health Card #:		Coaches Name:
Child Fitness Tax Credit receipt issued to:		

Junior Skaters must confirm Intermediate sessions with your coach prior to submitting your application. Skaters are not permitted on the ice until the application and payment have been accepted by the Board.

Please indicate desired sessions:

Level	Days	(please check)	Package	Cost	Total Cost
CanSkate & PreSchool 20 weeks	Tuesday 6:10-7:10	<input type="checkbox"/>	1 day	\$259.00	
	Thursday 6:10-7:10	<input type="checkbox"/>	2 days	\$430.00	\$ _____
	Saturday 9:10-10:10	<input type="checkbox"/>			
Junior	Tuesday 5:00-6:00	<input type="checkbox"/>	2 days	\$430.00	\$ _____
	Tuesday CanSkate	<input type="checkbox"/>			
	Wednesday 6:15-7:15	<input type="checkbox"/>			
	Thursday 5:00-6:00	<input type="checkbox"/>			
	Thursday CanSkate	<input type="checkbox"/>			
	Friday 6:20-7:05	<input type="checkbox"/>			
	Saturday CanSkate	<input type="checkbox"/>			
	Saturday 10:20-11:35	<input type="checkbox"/>			

Discount (3 days/wk – 5%, 4 days/wk – 10%, 5 days/wk – 15 %) \$ _____

Skate Canada & WOS Registration Fee & Insurance: \$ _____ 30.70

Promotional Lottery Book (mandatory, one per family): \$ _____ 40.00

Total Fees Payable: \$ _____

FOR OFFICE USE	Processed by: _____
Date: _____	Ticket Book #: _____
Payment: Cheque #: _____	<input type="checkbox"/> Visa <input type="checkbox"/> MC exp date: _____
Amount: \$ _____	Card number: _____
Name on card: _____	

I understand that the Dundas Figure Skating Club is not liable in the case of accident, injury or loss however caused. In submitting this document, I acknowledge that the Dundas Figure Skating Club may use my Child's photograph in Club publicity or advertising.

IDO NOT authorize the Dundas Figure Skating Club to use my child's photograph in Club publicity or advertising.

Signature (Parent/Guardian if under age 18) _____ Date: _____



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Dear Parents,

As you know, the Dundas Figure Skating Club is an organization run by volunteers. Every year the Board faces the challenge of finding enthusiastic people willing to get involved. This year we are hoping that we can count on you to donate some of your valuable time to us to ensure that this skating season is not only successful but lots of fun too. We are only asking for a very small commitment, some way in which you can feel involved with the Club. It could be as simple as picking up balloons for the Recognition Banquet to handing out awards at the Club Competition. Below we have listed a few events that we have planned. Please take the time to consider helping with one of these or suggest something that you would like to do.

I can volunteer some time to:

- Annual Club Competition (December 18, 2010)
- Hallwents Competitions – Sept 24-26, 2010
- Mar 5-6, 2011
- Skate Canada Test Days
- Annual Recognition Banquet (May 2011)
- Board Member

For those of you with high school aged children or who know high school aged children looking for volunteer hours, there are many opportunities to get the hours at the club.

I have a High School aged child looking for volunteer hours

Thank you very much for your help.
Dundas Figure Skating Club

Name:

Phone number:

e-mail:

Skater's name:

Please deposit this form in the Club mailbox or hand it to one of the Board members