



## Grandview Skating Club – CANPOWERSKATE Registration Form WINTER 2017: January 7 – March 11

Last Name:	First Name:	Male □ Female □
Birthdate: Day Month Year	Skate Canada	#
Address:	City:	Postal Code:
Phone: Cell	Care Card #	
Parent's Name:	Email Address:	
Emergency Contact:	Phone:	
Please state any MEDICAL INFORMATION we sineeded).	hould be aware of including allergies and pa	ast injuries (please attach any extra information if
CANPOWERSKA	☐ Saturday 8:00	

## For Club Use Only

	FALL – 12 Sessions	3	WINTER – 10 Sessions	COMBO (Fall + Winter)
Registration Fee	□ 1x - \$195		□ 1x - \$165	□ 1x - \$325
Annual Skate Canada				
Membership Fee	□ \$35.65 (pay only once annually)			
TOTAL PAYABLE				
Date Received				
Payment Type	☐ Cash ☐ Cheque*		☐ Cash ☐ Cheque*	☐ Cash ☐ Cheque*
	Cheque #		Cheque #	Cheque #
		_		•
Club Member Signature				
☐ Annual Voluntee	r Bond 🔲	Inp	out Skate Canada	
Received				

PLEASE READ POLICIES AND SIGN BOTTOM OF PAGE TWO

<sup>\*</sup>A fee of \$50 will be charged for NSF cheques





## **Grandview Skating Club Policies**

- 1. FUNDRAISING To keep our fees as low as possible it is necessary as a club to fundraise. We are a non-profit organization run by a volunteer board of executives. In order to offset the high cost of ice and coaching expenses, we will occasionally hold events which promote fun while raising funds for the club. We request your support and participation in our events and a \$25 volunteer bond is required (see separate form). It will be returned upon fulfillment of volunteer obligations (one hour). You can opt out of volunteering by donating your volunteer bond to the club. Fundraising events and volunteer opportunities will be announced via email and posted on the Grandview Skating Club's bulletin board located in the lobby.
- 2. NO REFUNDS WILL BE ISSUED AFTER 1st DAY OF SKATING unless accompanied by a valid Medical Certificate. All refunds will be pro-rated. An administration fee of \$50.00 will apply to all refunds being processed.
- 3. A PARENT or Guardian is required to stay in the skating rink during their child's session. Also, the child should know the name of the parent or guardian accompanying them to the lesson.
- 4. PHOTOS AND VIDEO POLICY

Your child will be taking part in Grandview Skating Club events where club directors will take photographs/videos of the event or activity that may contain images of your child. It is likely that these images may be used as

- · a record of the activity or the event
- · coaches training assessment
- publicity material for further activities or events on leaflets/websites/magazines
- illustrations of the activities or events in published articles future grant applications
  - □ I (parent/carer) consent to Grandview Skating Club photographing or videoing my child.
    □ I (parent/carer) do not consent to Grandview Skating Club photographing or videoing my child
- 5. GRANDVIEW SKATING CLUB, it's BOARD MEMBERS, COACHES and VOLUNTEERS are not responsible for any accidents, injuries or loss of personal belongings either on or off the ice at the TROUT LAKE ARENA, SUNSET ARENA while attending skating sessions. I understand that the GRANDVIEW SKATING CLUB is not responsible for cancellation of classes due to unavailable ice, but will make every effort to reschedule, if at all possible.
- 6. **HELMETS** All Stage 6 and under skaters are required to wear a CSA approved hockey helmet on the ice. Snowboarding, ski and bicycle helmets not allowed. Skaters who do not have proper equipment will be removed from the ice.
  - ☐ I HAVE READ & UNDERSTAND THE ABOVE CLUB POLICIES

Signature of parent, guardian or skater (over 18 y	vears of age):
	5.
	Date: