

Lacombe Figure Skating Club

2011-2012 Registration

Skate Canada #: _____

If you have a registration form on file, do not fill out. You can check your form at Registration Night.

Skater Information

Last Name: _____ First Name: _____

Address: _____ Postal Code: _____

Phone: _____ Email: _____

Birthday: Day ____ Month ____ Year ____ Sex: Male Female

Doctor: _____ A.H.C. #: _____

Medical Conditions: _____

Contact Information

Primary Contact	Last Name*	First Name*	Relationship
	Home Phone	Cell Phone	Work Phone
	Address		City
	Postal Code	Email	
* Only last & first name(s) contact info required for other children in the family after the first child's registration is complete			
Secondary Contact	Last Name	First Name	Relationship
	Home Phone	Cell Phone	Work Phone
	Address		City
	Postal Code	Email	
Emergency	Last Name	First Name	Relationship
	Home Phone	Cell Phone	Work Phone

Privacy Act: The Lacombe Figure Skating Club holds all the information contained on this form in complete confidentiality and does not make it available to anyone beyond our professional coaches and executive members. Skate Canada requires all information but uses it for their records and for insurance purposes only.

I hereby agree that I will not hold the Lacombe Figure Skating Club or it's officials responsible in any way for injuries which may occur to my child(ren) or self during the preparations for, or during lessons, practices, test days, clinics, or other events sponsored by or in connection with the Lacombe Figure Skating Club.

Signature of Parent or Guardian _____

Date _____

Date Last Checked: _____

Lacombe Figure Skating Club

2011-2012 Registration

Skater's Last Name: _____ First Name: _____

Preschool CanSkate

Both Sessions A & B	<input type="checkbox"/>	\$210.00	
Session A only (Oct 17-Dec 14, 2011)	<input type="checkbox"/>	\$130.00	
Session A Bears Program (Oct 17-Dec 14)	<input type="checkbox"/>	\$130.00	
Session B only (Jan 9-March 11, 2012)	<input type="checkbox"/>	\$130.00	
Fundraising - Three Wreaths			<input type="checkbox"/> \$81.00
Costume Size for Carnival			
Adult Size _____		Child Size _____	

CanSkate

Both Sessions A & B	<input type="checkbox"/>	\$270.00	
Session A only (Oct 17-Dec 14, 2011)	<input type="checkbox"/>	\$180.00	
Session B only (Jan 9-March 11, 2012)	<input type="checkbox"/>	\$180.00	
Fundraising - Three Wreaths			<input type="checkbox"/> \$81.00
Costume Size for Carnival			
Adult Size _____		Child Size _____	

Primary Test

Program Fee	<input type="checkbox"/>	\$435.00	
Music Fee			<input type="checkbox"/> \$175.00
Fundraising - Three Wreaths			<input type="checkbox"/> \$81.00

STARSkate - Club Member

Program Fee	<input type="checkbox"/>	\$560.00	
Music Fee			<input type="checkbox"/> \$350.00
Fundraising - Three Wreaths			<input type="checkbox"/> \$81.00
Drop-in Administration Fee			
Home Club Lacombe	<input type="checkbox"/>	\$50.00	
Affiliated Club	<input type="checkbox"/>	\$25.00	
Punch Card (10 hours per card)	<input type="checkbox"/>	\$100.00	

Subtotal	<input type="text"/>
Less Sept 19 Discount	<input type="text"/>
Less PA Credits	<input type="text"/>
Total	<input type="text"/>

Fees are payable in full on the date of registration or by two cheques dated September 19, 2011 and January 31, 2012. Make cheques payable to the "Lacombe Figure Skating Club". There will be a \$25.00 charge for all NSF cheques.

Requests for refunds or credits must be submitted in writing within two weeks of the start of the session. Any requests for refunds due to medical conditions will require a doctor's certificate and will be pro-rated. A \$50.00 administration fee will apply to all refunds.



Lacombe Figure Skating Club

USE OF PHOTO OR VIDEO - CONSENT:

Under the *Freedom of Information and Privacy Act*, it is necessary for the Lacombe Figure Skating Club to obtain consent in order to use photos and/or video footage of people for the purposes identified below. Any use of these images by the Lacombe Figure Skating Club will not go beyond a reasonable amount of time.

Collection and Use: The photos and/or videos taken on this occasion will be used to promote the Lacombe Figure Skating Club and the programs and services: i.e. recreation, fitness etc. offered by the club. Your consent gives the Lacombe Figure Skating Club the right to use these images in different media. These may include but are not limited to newspaper ads, brochures, newsletters and other printed materials; and on the Lacombe Figure Skating Club's website. Though the images will be used only by the Lacombe Figure Skating Club, the materials that are used may be distributed elsewhere.

Personal Consent: I hereby waive any rights to inspect or approve the use of photographs or video footage taken of me by photographers working on behalf of the Lacombe Figure Skating Club, and hereby consent to the uses specified above in the collection and use section. In a group setting, other than family, each individual appearing must sign this consent in order to have the photo and/or video footage available for the Lacombe Figure Skating Club's use. Only one signature is required per family. If a minor is appearing alone in a photo, the consent of a legal guardian is required.

Name: _____

Signature: _____

Date: _____

I do not give consent:

Signature: _____

Date: _____

Privacy Statement: This personal information is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act (FOIP). If you have any questions about the collection and use of your information, contact the Registrar for the Lacombe Figure Skating Club.

DATE: _____

PARENT(S) SIGNATURE: _____