



# Skating School Classes

## 2020 Academy Schedule Semester 2 March 3<sup>rd</sup>-April 25<sup>th</sup>

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ PARENT NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

(PLEASE WRITE CLEARLY)

EARLY BIRD \$155  FAST TRACK \$325, EARLY B. \$300  FULL 8 WEEKS \$170  HALF PASS \$85   
DROP IN \$22/SESSION EARLY BIRD ENDS FEB. 29<sup>TH</sup>

TUESDAY 5:30PM-6:00PM  THURSDAY 5:30-6:00  SATURDAY 11:15AM-11:45AM

Tots (Ages3-5)  Alpha  Gamma/Delta

Pre Alpha  Beta

### Freestyle

TUESDAY 6:30-7:00  THURSDAY 6:30-7:00  SATURDAY 10:15-10:45

Please indicate Freestyle Level    **1**    **2**    **3**    **4**    **5**    **6**

### Open Practice Time for all classes included with purchase of class:

TUESDAY 6:00-6:30PM                      THURSDAY 6:00-6:30PM                      SATURDAY 10:45-11:15AM

Included with purchase of class gives the skaters the opportunity to learn skills outside of their class level, combine elements that have been mastered or a time to continue working on mastering current class skills with coach supervision. **The class also comes with an 8 punch public skating pass!**

In consideration of being allowed to participate in any skating/sports program and related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from activities involved in these programs is significant, including the potential for permanent paralysis and death. While particular rules, equipment and personal discipline may reduce the risk, the risk of serious injury does exist.
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases (as defined below) or others and assume full responsibility for my participation.
3. I willingly agree to comply with any rules and regulations of the facility. If, however I observe any unusual significant hazard in participation, I will bring such hazard to the attention of the nearest official immediately.
4. I, myself and on the behalf of my heirs, assigns, personal representatives and next-of-kin, hereby release and hold harmless all members of the **Vacaville Ice Sports** and anyone associated with **Vacaville Ice Sports**.
5. I understand that each participant may be captured in pictures and videos that may be used for program/facility advertising.
6. I understand that Vacaville Ice Sports and it's representatives have the right to discharge me from the premises at any time .

I have read this release of liability and assumption of risk agreement, fully understand its terms and understand that I have given up substantial rights by signing it freely and voluntarily without any inducement.

**\*NO REFUNDS\***

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Skating Director, Chris Kinser for further information

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