

SUMMER 2011 MFSC CLUB ICE REGISTRATION
JUNE 20 – AUGUST 25

[Refer to separate calendar for complete schedule](#)
[Complete Ice Use Policies are on the web site. Please read them.](#)

- Completed registration form and payment should be placed in the **Ice Chair folder in locker room** or mailed to **Denise Baker, 3155 N. Carriage CT, Midland MI 48642** by **Sunday, June 5th**.
- Please keep a copy of your completed registration form.
- Sessions are subject to cancellation due to low enrollment – you will be contacted if your registration needs to be adjusted.
- Please complete a separate registration form for each skater in a family. **Complete both pages of the form for each skater.**
- Refunds, in the form of ice credits only, may be issued at the discretion of the Board.
- **Questions?** Contact Denise Baker @ 636-3462 (daytime) or DABAKER@dow.com

FEES

- If your total ice fees exceed \$400, you may make **two** payments: **50%** due **with registration** and **balance** due on **Friday, July 22nd**.
- Please write one check to cover registrations for all family members.

OTHER

- Only registered skaters may make up missed sessions and must notify the monitor before getting on the ice.
- Drop-in skaters must notify the monitor and pay the drop-in fee before getting on the ice.
- General sessions: Free Skating, Dance and MIF allowed.

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Use a separate Registration Form for each skater (Please Print)

Name _____ Age ____ Date of Birth _____ M or F _____
Last First

Address _____ City _____ State _____ Zip _____

Email _____ Phone # (____) _____ USFS/CFS# * _____

Highest Level passed: Basic 4 ____ Basic Freeskating _____ No USFS Test _____

USFS Freeskating _____ MIF _____ Your Home Club _____

ICE MONITORS

Please indicate your monitoring preference(s) on the registration form. These volunteers are important for the safety of our skaters, to keep the sessions moving smoothly, and take attendance. Monitoring questions can be directed to Deb Lambesis at lambesisfam@att.net.

DECLINE MFSC Use of photographs:

I parent/guardian of **DO NOT** authorize Midland Figure Skating Club member and affiliates to take and use photographs of above child for use in newspapers, flyers, web site, or related publicity to promote the MFSC.

Signature _____ Date _____

WAIVER OF RESPONSIBILITY

The Midland Figure Skating Club and organizers of the club ice program undertake no responsibility for damages or injuries suffered by any skater. As a condition of, and in consideration of their enrollment, all enrollees and their parents and guardians shall be deemed to agree to assume all risks of injury to their person and property resulting from or caused by, or connected with conduct and management of the club ice program, and to waive and release any and all claims which they may have against the Midland Figure Skating Club, its officers, and/or employees and staff.

EMERGENCY CONTACT INFORMATION *(note any change from Summer 2010)*

Name of Skater _____

1. Phone: _____

2. Phone: _____

3. Phone: _____

Skater's physician Name and Phone: _____

Insurance Policy Carrier and #: _____

Allergies or other medical conditions: _____

Parent/Guardian/Adult skater signature: _____ Date: _____

Family Name _____

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June 20, 2011 – August 25, 2011

SKATER NAME _____

Please circle the session number(s) you are registering for and fill in the Skater Fee. Use one form for each skater in your family.

DAY	Session #	Session type	TIME	# of weeks	FEE	Skater Fee	Check if available to Monitor
Monday	101	G	3:00-4:00 pm	9	\$153		
	102	G	4:00-5:00 pm	9	\$153		
	103	G	5:00-5:50 pm	9	\$126		
	104	G+BS	7:00-7:50 pm	9	\$126		
Tuesday	201	G	10:00-11:00 am	10	\$170		
	202	G	11:00- 11:50 am	10	\$140		
	203	G	Noon – 1:00 pm	10	\$170		
	204	G+BS	1:00 – 1:50 pm	10	\$140		
Thursday	301	G	10:00-11:00 am	10	\$170		
	302	G	11:00- 11:50 am	10	\$140		
	303	G+BS	Noon – 1:00 pm	10	\$170		
				TOTAL	\$		

Summary of family ice fees due

Skater first name:	Fee
Skater 1	\$
Skater 2	\$
Skater 3	\$
Skater 4	\$
Total fees due	\$
Ice credit (attach email)	\$
Total payment due	\$
Amount enclosed (50% if total due exceeds \$400)	\$
Balance due July 22nd	\$

Registrations and payment are due by Sunday, June 5th

Make checks payable to MFSC

Mail to: Denise Baker, 3155 N. Carriage CT, Midland MI 48642 or put in Ice Chair folder in locker room