

INCOMPLETE FORMS WILL NOT BE ACCEPTED

**Colonial Figure Skating Club – FALL Ice Schedule
SEPTEMBER 4 – DECEMBER 10, 2017 (14 weeks)**

DEADLINES:

Ice Form Due (Seniority booking) – **August 23, 2017**
Aug. 23-31, 2017 forms processed 1st come, 1st serve
Add/Drop Deadline – **August 31, 2017**

SKATER: _____

DATE RECEIVED: _____ **TIME:** _____ **BY:** _____
BEFORE YOU SUBMIT... DID YOU?

ICE CONTRACTS WILL NOT BE ACCEPTED AFTER 8/31/2017.
ALL ADDED SESSIONS WILL BE WALK ON ONLY

- 1.) CIRCLE the BOX of the session(s) you wish to book? If booking for Pairs, write PR next to session number
- 2.) COMPLETE BOTH SIDES of this form including all payment questions on REVERSE. INCOMPLETE FORMS WILL NOT BE ACCEPTED.
- 3.) PAY OFF ANY previous balance (if applicable). PLEASE NOTE: skaters with un-paid balances will NOT BE ALLOWED TO BOOK ICE.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1 NoTest-Sr R1 Free/Moves 1:50-2:35 (45 Min)	12 NoTest-Sr R1 Free/Moves 1:50-2:35 (45 Min)	23 NoTest-Sr R1 Free/Moves 1:50-2:35 (45 Min)	33 NoTest-Sr R3 Free/Moves 1:55-2:40 (45 Min)	43 NoTest-Sr R3 Free/Moves 1:55-2:40 (45 Min)	52 NoTest-Sr R3 Free/Moves 9:00-9:45 (45 Min)	61 Basic Skills- R3 NM/Juv 11:30-12:30 (60 min) ENDS 6/11/17
2 NoTest-Sr R1 Free/Moves 2:45-3:30 (45 Min)	13 NoTest-Sr R1 Free/Moves 2:45-3:30 (45 Min)	24 NoTest-Sr R1 Free/Moves 2:45-3:30 (45 Min)	34 NoTest-Sr R3 Free/Moves 2:50-3:35 (45 Min)	44 NoTest-Sr R3 Free/Moves 2:50-3:35 (45 Min)	53 Juv-Sr R3 Free/Moves 9:55-10:40 (45 Min)	<p align="center">IMPORTANT INFORMATION</p> <p>TEST LEVEL: Eligible on Free/Moves Sessions based on freestyle test passed.</p> <p>JUV-SR: Pre-Senior freestyle skaters (or have competed) in the tryout event.</p> <p>Pre-preliminary freestyle sessions with exception of the 1, 9, 19, 20, 22, 29, 30, 35, 4, 56, 59, 60 & 61. These are for non-member Coaches only; unless noted is pre-preliminary or on the first 15 minutes - or are in a moves lesson.</p> <p>JUNCE team is allowed on sessions more than 12 skaters. An adult Non-Member may be allowed to walk-on to a session with less than 12 skaters (individual or the second pair is added to the session will close to any dance (Members & Non-Member and non-members.</p> <p>1 Hour Item PreBook Item WalkOn NonMem</p> <p>45 Min Item PreBook Item WalkOn NonMem</p> <p>30 Min Item PreBook Item WalkOn NonMem</p> <p>Basic Skills 30-40 min. 45 min or 60 min</p>
3 NoTest-Sr R1 Free/Moves 3:40-4:25 (45 Min)	14 NE Competitors R1 Juv-Sr Free/Moves 3:40-4:25 (45 Min)	25 NE Competitors R1 Juv-Sr Free/Moves 3:40-4:25 (45 Min)	35 Basic Skills-Juv R1 Free/Moves NM 3:00-3:45 (45 Min)	45 NoTest-Sr R2 Free/Moves 3:55-4:40 (45 Min)	54 NoTest-Sr R2 Free/Moves 10:10-10:55 (45 Min)	
4 NE Competitors R2 Juv-Sr WALK ON ONLY 4:10-4:55 (45 Min) LAST DAY 11/20	15 NoTest-Sr R2 Free/Moves 3:55-4:40 (45 Min)	26 NoTest-Sr R2 Free/Moves 3:55-4:40 (45 Min)	36 Basic Skills-Juv R1 Free/Moves NM 3:45-4:25 (40 Min)	46 NE Competitors R1 Juv-Sr WALK ON ONLY 3:40-4:25 (45 Min) LAST DAY 11/24	55 Juv-Sr R3 Free/Moves 10:50-11:35 (45 Min)	
5 NoTest-Sr R3 Free/Moves 4:40-5:40 (1 Hour)	16 NoTest-Sr R3 Free/Moves 4:40-5:40 (1 Hour)	27 NE Competitors R3 Juv-Sr Free/Moves 4:40-5:25 (45 Min)	37 NE Competitors R3 Juv-Sr Free/Moves 3:45-4:30 (45 Min)	47 NoTest-Sr R1 Free/Moves 4:35-5:20 (45 Min)	56 NoTest-Sr R2 Free/Moves 11:05-11:50 (45 Min)	
6 NE Competitors R2 Juv-Sr Free/Moves 5:05-5:50 (45 Min)	17 NoTest-Sr R2 Free/Moves 4:50-5:35 (45 Min)	28 NoTest-Sr R2 Free/Moves 4:50-5:35 (45 Min)	38 Juv-Sr R2 Free/Moves 4:25-5:10 (45 Min)	48 NoTest-Sr R2 Free/Moves NM 4:50-5:50 (1 Hour)	57 NoTest-Sr R3 Free/Moves 11:45-12:25 (40 Min)	
7 NoTest-Sr R3 Free/Moves 5:50-6:35 (45 Min)	18 Juv-Sr R3 Free/Moves 5:50-6:35 (45 Min)	29 NoTest-Sr R2 Free/Moves NM 5:45-6:30 (45 Min)	39 NoTest-Sr R3 Free/Moves 4:40-5:25 (45 Min)	49 NoTest-Sr R3 Free/Moves/ NM Dance 5:50-6:35 (45 Min)	58 NoTest-Sr R3 Free/Moves 12:35-1:20 (45 Min)	
8 NoTest-Sr R2 Free/Moves NM 6:00-6:45 (45 Min)	19 NoTest-Sr R2 Free/Moves/ NM Dance 5:45-6:30 (45 Min)	30 NoTest-Sr R2 Free/Moves/ NM Dance 6:40-7:10 (30 Min)	40 NoTest-Sr R2 Free/Moves 5:20-5:50 (30 Min)	50 NoTest-Sr & R3 Adult Free/Moves/ Dance 6:45-7:30 (45 Min)	59 NoTest-Sr & Adult R3 Free/Moves/ Dance 2:25-3:10 (45 Min)	
9 NoTest-Sr R3 Free/Moves NM 6:45-7:30 (45 Min)	20 NoTest-Sr & R3 Adult Free/Moves 6:45-7:30 (45 Min)	31 NoTest-Sr & R2 Adult Free/Moves/ Dance 7:10-7:55 (45 Min)	41 ISI R3 5:35-6:35	51 NoTest-Sr & R3 Adult Free/Moves/ Dance 7:30-8:15 (45 Min)	60 NoTest-Sr & Adult R3 Free/Moves/ Dance 3:20-4:05 (45 Min)	
10 NoTest-Sr & R3 Adult Free/Moves/ Dance 7:40-8:25 (45 Min)	21 NoTest-Sr R2 Free/Moves/ Dance 6:40-7:25 (45 Min)	32 NoTest-Sr & R2 Adult Free/Moves/ Dance 8:05-8:50 (45 Min)	42 NoTest-Sr R3 Free/Moves 6:45-7:30 (45 Min)			
11 NoTest-Sr & R3 Adult Free/Moves/ Dance 8:35-9:20 (45 Min)	22 NoTest-Sr & R2 Adult Free/Moves/ Dance 7:25-8:10 (45 Min)					

**R1 = Rink 1
R2 = Rink 2
R3 = Rink 3**

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SKATER: _____ **PHONE:** _____

EMAIL: _____ **COACH:** _____

HIGHEST TEST PASSED: **FREE** _____ **MOVES** _____ **PAIR** _____

Number of 1 Hour Sessions **per week** _____ x \$18.00 = _____

 Sunday #61 _____ x \$14.00 = _____

*Sunday, Session 61: Pre Booked Skaters will only be charged for 6 weeks, 4/9, 4/30, 5/7, 5/14, 6/4, 6/11

Number of 45 Min Sessions **per week** _____ x \$14.00 = _____

Number of 40 Min Sessions **per week** _____ x \$13.00 = _____

Number of 30 Min Sessions **per week** _____ x \$12.00 = _____

TOTAL SESSIONS per week _____

TOTAL cost per week (Deposit due with form) _____

****IMPORTANT****

- Applicant must have current membership with CFSC.
- Applicant must pay any remaining account balance in full (if applicable).
- **Applicant must select payment option and payment method.**
- Applicant must submit a deposit equal to one week of ice, with this form.
- Accounts will be adjusted for sessions cancelled due to holidays, events, etc.
- Installments will be charged according to the payment option selected, and will be determined by actual ice total – after any changes.

- CASH
- CHECK
- CREDIT CARD (If selected, complete the information below)

CREDIT CARD INFORMATION

CIRCLE TYPE MasterCard VISA Discover (We **DO NOT** accept AMEX)

Cardholder's Name _____ Cardholder's Email Address _____

Address _____ City _____ State _____ Zip _____ Phone _____

Credit Card # _____ Exp Date _____ / _____

CARDHOLDER'S SIGNATURE _____

DATE _____

**By signing above, I authorize my monthly ice fee to be automatically charged to my credit card noted above, or on file with CFSC.*

FOR OFFICE USE ONLY

TOTAL INVOICE: _____ **Deposit:** CASH / CHECK # _____ VISA / MC / DISC. _____

Monthly Payment: Sept. \$ _____ Date _____ Oct.. \$ _____ Date _____ Nov. \$ _____ Date _____