



Saugeen Shores Skating Club

2015-2016 Registration—January – March

**CANSkate
Pre STARSkate**

Last Name:	First Name:
Address:	Telephone:
Town:	Postal Code:
Skate Canada #:	Date of Birth:
Highest Level Achieved:	(DD/MM/YYYY)
Email Address:	Gender:

Parent/Guardian Names	Home Telephone	Cell Phone
Emergency Contact:		

1 Day Monday	\$75	
1 Day Thursday	\$85	
1 Day Saturday	\$75	
2 Days Monday & Thursday	\$130	
2 Days Monday & Saturday	\$115	
2 Days Thursday & Saturday	\$120	
3 Days Monday, Thursday & Saturday	\$160	

Registration Fees		\$
Skate Canada Fee		\$ 35.00
Raffle Tickets	Book #s <small>*The level of fundraising participation is determined by the highest skating level of a family member.</small>	\$ 120.00
Picture		\$ 10.00
TOTAL	Cash Chq #	

Health issues that the coaches and Club should be made aware of:

I understand that it is my responsibility to keep Saugeen Shores Skating Club advised of any changes to my child's medical information and our contact information. I authorize the SSSC Coaches or Executive to seek appropriate emergency medical care for my child if I, or the emergency contact cannot be reached. Parent/Guardian Initials: _____

PHOTO CONSENT: Occasionally, local publications are interested in using our skaters' photos and information. As well, SSSC may wish to feature certain skaters on our bulletin board, website, and social media. Please give the Club consent to allow your child(ren)'s achievements to be featured. Parent/Guardian Initials: _____

By signing below, you are confirming that all the above information is accurate and you have received SSSC's Information Package in regards to the Helmet Policy, Refund and Cancellation Policy, Fundraising and the Parent Code of Conduct.

Signature of Parent/Guardian

Date

