

The Ice Hutch Skating School Group Lesson Program

Spring Session: April 14th – June 27th (10 Weeks) 2 classes/week \$425 or 1 class/week \$265 Rolling admission • Pro-rating available

TUESDAYS No Class 6/23

4:00pm Snowplow 1, Basic 1-3, Hockey **4:30pm** Snowplow 1-3, Basic 1, 4-6

SATURDAYS No Class 5/23

Roster

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12:00pm Snowplow 1-3, Basic 1, 2, Hockey **12:30pm** Snowplow 1-3, Basic 1, 3 - 6

Price includes:

- ❖ Weekly 30 minute group lesson
- Skate rental on lesson day & during Public Skating
- ❖ Public Skating on Tuesdays 3:00pm 5:00pm & Saturdays 1:15pm 2:45pm.

Please note:

- New skaters ages 4-6 should register for Snowplow 1. New skaters ages 7 & up should register for Basic 1
- There are no refunds. Make-ups will not be offered for missed classes.
- Skaters in a class with less than 3 or greater than 12 skaters may be notified and moved to another time slot.
- All skaters will be issued a name tag, which must be worn every week to class AND to public skating.
- ❖ In the event of inclement weather please check **www.icehutch.com** for cancelations/closings.

Equipment:

- Helmets are required for all skaters ages 6 & under and for Hockey classes.
- Mittens or Gloves
- The rink temperature will vary. Layered clothing that does not restrict movement is recommended.
- Only 1 pair of thin socks should be worn with skates.

*********Registration will not be accepted on class days.********

Please register in advance of the date you wish to begin.

Sign waiver on reverse side and mail the registration form below with payment to the above address.

	to Skate Spring Session 2020 Re	egistration Fo	— — — — orm	
Name	Circle: M	or F Age	D.O.B	
Phone	_ Email			
Address_	City			Zip
DAY(S) Requested: Tuesday	Saturday	TIME	E(S) Request	:ed:
Indicate the class & level you wish to	o register for: Snowplow Sam (4	1-6 yr. Olds) 1	- 3	
Basic (7 yrs. & older) 1 – 6	Hockey Skating 1 – 4 Must have passed Snowplow 3 / Basic 2			
PAYMENT: Make checks payable to the Ice A \$25 fee will be charged on all		card.	FOR OFFIC	E USE ONLY
Card #	Exp.Date CVV			By
		I I P	Paid	#

The Ice Hutch 655	Garden Avenue, M	Mt. Vernon, N	NY 10550	914.699.6787	skatingschool@icehutch.com

I hereby agree to waive liability and release any and all claims against The Ice Hutch (the "Facility"), its affiliated clubs and their officers, directors, agents, coaches and other employees for injuries and damages suffered by myself or my child, 18 or under, for whom I am signing, during programs at the Facility or while at the Facility for any other reason, whether on or off the ice. I acknowledge that ice skating and other physical activities at the Facility involve risk of serious bodily injury which may result from my own actions and/or those of my child or the action of others or the condition of the premises or any equipment used or rented from the facility. I fully accept and assume all risks and all responsibility for all losses and damages incurred as a result of my participation and my child's participation in these activities. I have read the rules of The Ice Hutch and will abide by them. I have explained the rules to my children. I acknowledge that the Facility requires the use of a helmet by any child in the skating school under six years old. I agree that the staff of the Facility may require the withdrawal from any session of any skater who violates the rules or fails to wear a helmet when required.

I hereby consent to pictures being taken of myself and/or my child by employees or authorized agents of The Ice Hutch and understand that such pictures will become property of The Ice Hutch. The Ice Hutch may use them for promotional purposes without the payment of any fees or compensation to me and/or my child.

I understand that there are no refunds for any reason and that the full fee is due prior to the first class.

The undersigned has read the above waiver and release, understands the information contained therein and by signing below voluntarily agrees to the terms and conditions of the participation and/or the participation of the child in the program.

Signature	Date			
Print Name				