

Lakefield Skating Club: **Program Assistant (PA) & Guest Skate** Registration Form 2019-2020
PO Box 24 LAKEFIELD ON K0L 2H0

Please note: All fields are required by Skate Canada (our governing body). Incomplete registrations will be returned.

First Name: _____ Last Name: _____

Birth Date: Month (e.g., JUL) _____ Day _____ Year _____ Age: _____ Gender: **M F**

Mailing Address: _____ City: _____

Postal Code: _____ Phone Number: (H) _____

Athlete and/or Parent Name: _____

Email: _____

The Lakefield Skating Club uses email to keep you informed of program information, including registration, events, important dates, and fundraising. To unsubscribe from our distribution list at any time, please respond to our email with a subject line of: Unsubscribe.

If you/your child have any medical conditions that may affect full participation, please speak to a Board Member in advance of registration.

Parents are required to remain at the arena during lessons. The parents/athletes/legal care custodians agree that the Lakefield Skating Club and/or its Proprietors will not be held responsible for any accident or loss, however caused, and agrees to release the proprietors from all claims and/or damages which may arise as a result of/or by means of such accident or loss.

I acknowledge that Lakefield Skating Club may take photos and/or videos of me/my child for LSC newsletters, website or other displays and that these images may be copied as they are in the public domain..

Signature: _____ Date: _____

Have you/your child previously been registered with the Lakefield Skating Club? Yes, year: _____ No

Have you/your child ever been registered with another club? Yes, club&year: _____ No

Skate Canada # _____ If skating in more than one club, designate home club: _____

Guest skaters can join our STARSkate sessions below for \$20/hour, if the Skate Canada fee has been paid:

Mandatory Skate Canada fee: \$43.65
TOTAL: _____

Days: Mondays (October–March)
7:00–7:55 pm (1 hour)

Thursdays (October–March)
6:05–6:55/7:55 pm (1 or 2 hours)

Payment Method: Cash Cheque (Payable to Lakefield Skating Club - **no** post-dated cheques, please)
 eTransfer to lakefieldskating@gmail.com (indicate skater's name in comment)

For Board Use Only: PA only: (LSC Board pays)

Guest Skater

Guest Skater and PA

Amount: _____ Chq # _____ Date: _____ Paid : full or owing: _____

Skate Canada Registration Date: _____ or Registered with another club: _____

Email address added to group: _____

Criminal Reference check on file (for program assistants only – if applicable)