

2018 AVALON REGION SCNL CANSKATE

Location:	<i>Mount Pearl Glacier (2)</i>	
Dates:	<i>Spring Session</i>	<i>Tuesday, May 1 - Saturday, June 9, 2018</i>
	<i>Fall Session</i>	<i>Saturday, September 1 - Tuesday, September 25, 2018</i>
Times:	<i>Saturday</i>	<i>11:05 AM - 11:55 AM</i>
	<i>Tuesday</i>	<i>5:55 PM - 6:45 PM</i>
Cost:	<i>Spring Session:</i>	<i>150.00 (2 days/week)</i>
	<i>Fall Session:</i>	<i>100.00(2 days/week)</i>

General Information:

- Skaters must register for the full CanSkate program (2 days/week) and be current Skate Canada members in **Stage 2 or higher**.
- The deadline for both Spring and Fall CanSkate sessions is **April 3, 2018**.
- Applications will be accepted on a first come first served basis.
****Priority is given to Avalon Region skaters registering for both the Spring and Fall sessions.**

Payments

- Cheques/Money Orders for the **Spring CanSkate** session dated **April 3, 2018**.
- Cheques/Money Orders for **Fall CanSkate** session post-dated **August 17, 2018**.
- E transfers avalontreasurer@gmail.com
- Applications must be accompanied with full payment.

Refunds

- All refunds are subject to an administration fee of 50% of fees paid, up to a maximum of \$50. No refunds will be issued after **April 30, 2018** for Spring and **August 24, 2018** for Fall, except for medical reasons.
- Acceptance will be confirmed via email after April 10, 2018.

All inquiries concerning CanSkate sessions should be directed to:

Katie Blagdon – katieb13@hotmail.com

Mail (or hand deliver) Applications to:
Avalon Region SCNL
c/o 64 Birmingham St.
St. John's, NL
A1E 5M9

2018 AVALON REGION SCNL CANSKATE
APPLICATION

SKATER'S NAME:	HOME CLUB
MAILING ADDRESS:	PHONE #:
	DATE OF BIRTH: month /day / year
e-mail:	MCP #
	SKATER'S SKATE CANADA #

**Information and updates regarding CanSkate sessions will be sent via email.*

SKATING LEVEL **Please compete fully in order for skaters to be placed in the correct group/level*
Highest Ribbon Achieved:

Balance _____ Agility _____ Control _____

Highest Stage Passed: _____

Session(s) Applied For:

<i>Spring & Fall</i>	<i>Spring Only</i>	<i>Fall Only</i>
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Priority will be given to skaters applying for **both Spring and Fall CanSkate sessions.*

RELEASE

In consideration of its benefits awarded to us by acceptance of this application, the undersigned agrees to save and hold blameless the Avalon Region Off-Season Schools, it's Professional Coaches and Officers, for any claims and injuries sustained. The undersigned agrees to abide by all rules of the school and of Skate Canada as set forth in the Rule Book of that association and will be responsible to pay promptly for all sessions booked for the skater in this application.

Parents Signature: _____ Date: _____

The Avalon Region reserves the right to refuse any application due to lack of payment to a Skate Canada registered club or coach by the applicant.

Cheques/Money Orders Payable to: Avalon Region SCNL
E transfers avalontreasurer@gmail.com

**Please write skaters first and last name on the memo line of the cheque*

Deadline for applications is April 3, 2018