



Canskate/PreCan Skate Registration 2018/2019

PO Box 931
Port Perry, ON L9L 1A8
www.portperryskatingclub.ca
ppsc@portperryskatingclub.ca

Skater Name (Last, First):	_____		
Birthdate:	_____	Gender:	F M
Skate Canada #:	_____		(if available)
Address: _____			
Parent Name(s): _____			
Home Phone:	_____	Mobile Phone:	_____
**Email address: _____			
Emergency Name and Number: _____			
Previous Club:			(if applicable)
<p>**Email address is mandatory for club updates and news</p> <p>Members can earn rebates of registration fees. I want to be contacted to assist in fundraising activities.</p>			
		Yes	No

Fee Summary

Program Total (from page 2)	_____
Less: Family Discount (For each child after first, \$50 for Fall, \$100 for Full Year)	-
Less: other credits	-
Total Owing:	_____

Please make **cheques** payable to Port Perry Skating Club or PPSC

Payment Schedule

	1(at registration)	2	3	4
Date	_____	_____	_____	_____
Amount	_____	_____	_____	_____

Payment in full required by: Fall Session: October 31, 2018
Full Year: December 31, 2018

I hereby declare that I have read the registration information and to the best of my knowledge, the above information is correct and I agree to abide by the club rules, by-laws and registration conditions. I understand that PPSC will do everything it its power to prevent accidents, but will not be responsible in the event of an injury or loss. I also agree to be responsible for the actions of the applicant. Please note that any skater who displays inappropriate behaviour on or off the ice will be asked to leave the arena at the discretion of the Coach, PPSC Executive or arena staff. This will be strictly enforced. I understand the cancellation policy and that fees may be assessed depending on date of withdrawal. I understand the payment due dates and that a \$30.00 fee will be assessed for NSF cheques. All programs are subject to minimum and maximum enrollments, and subject to cancellation or changes in requirements. Certain programs and the annual Carnival are subject to age restrictions.

Signature of Parent/Guardian: _____ Date: _____



Program Fee Calculation 2018/2019

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Skater Name: _____

<u>Learn to Skate</u>	<u>Price</u>	<u>Cost</u>
<u>PreCanSkate Full Year</u>		
One Day (circle Tuesday or Thursday)	\$520	
Both Days	\$640	
<u>PreCanSkate Fall</u>		
One Day (circle Tuesday or Thursday)	\$360	
Both Days	\$420	
<u>PreCanSkate Winter</u>		
One Day (circle Tuesday or Thursday)	\$300	
Both Days	\$355	
<u>CanSkate Full Year</u>		
One Day (circle Tuesday or Thursday)	\$520	
Both Days	\$640	
<u>CanSkate Fall</u>		
One Day (circle Tuesday or Thursday)	\$360	
Both Days	\$420	
<u>CanSkate Winter</u>		
One Day (circle Tuesday or Thursday)	\$300	
Both Days	\$355	
<i>(One day Learn-to-Skate program circle Tuesday or Thursday)</i>		
<u>Add-on</u>		
<u>Pre STARS</u>		
One Day (circle Monday or Thursday)	\$175	
Both Days	\$250	
Program Total		