

Bolton Ice Palace

2017/2018 HOMESCHOOL SKATING PROGRAM

Wednesdays, 1:20 – 2:20 PM



Name of Skater(s): _____ DOB: _____ Age: _____ M__ F__

Name of Skater(s): _____ DOB: _____ Age: _____ M__ F__

Name of Skater(s): _____ DOB: _____ Age: _____ M__ F__

Name of Skater(s): _____ DOB: _____ Age: _____ M__ F__

Name of Skater(s): _____ DOB: _____ Age: _____ M__ F__

Street: _____ City _____ Zip _____

Phone: _____ E-mail: _____

New Registration? Yes No Parent: _____

Session #1: ___ Sept 6 - Oct 25

Session #2: ___ Nov 1 - Dec 20

Session #3: ___ Jan 13 - Feb 21

Session #4: ___ Feb 22 - April 4

Session #5: ___ Apr 11 - May 3

(7 week session - \$119)

All Sessions subject to change

Updated 8/11/17

Helmets are recommended for all beginner level skaters ages 7 and under. Children under the age of 11 cannot be left unattended. Parents must remain at the rink. We reserve the right to alter/cancel a session. **There are no make-up classes or refunds**

Statement of Release

It is fully understood that Bolton Ice Palace, LLC, its officers, employees and coaches assume no responsibility or liability for the injuries or loss of property which might occur during the above listed skating classes to any participant or spectator of the class. In consideration of the acceptance of this application, I, the undersigned, waive any claim or cause of action which might accrue against Bolton Ice Palace, LLC, its officers, employees and coaches by reason of personal injuries, loss of or damage to property while at the Bolton Ice Palace. I understand the above statements and agree to this waiver.

Parent Signature: _____ Date: _____

Questions? Call Anita @ 860-305-9402

Email: anicarr@charter.net



Questions? Call Anita @ 860-305-9402

Email: anicarr@charter.net

Each 8 week Session:

1 skater
\$136

2 skaters
\$272

3 skaters
\$367
10% discount

4 skaters
\$367
4th child free

5 or more skaters
\$45 each add't'l
skater

(Includes instruction, skates, ice and registration fees)

Make checks payable to Bolton Ice Palace

145 Hop River Road, Bolton, CT 06043

PAYMENT: | AMOUNT _____ | CHECK # _____ CHARGE _____ CASH _____