

GREATER MILWAUKEE FIGURE SKATING CLUB
“SKATE WITH US”
BASIC SKILLS GROUP LESSON PROGRAM

RINK FACILITY: Eble Ice Arena, 19400 W. Bluemound Road, Brookfield, WI., 53045
CLASS DAY AND TIME: Classes are held on Wednesday evenings from 6:15p-7:00p
REGISTRATION FEE: \$125.00 for seven weeks...\$220.00 for fourteen weeks
FAMILY DISCOUNT: Third participant...\$30.00 off
SKATE RENTAL: Available at Eble Ice Arena...\$14.00 for seven weeks (not incl. in class fee)
TO ENROLL: Complete the section below (checks payable to: **Skate With Us**) and mail the ENTIRE form to:

SKATE WITH US PROGRAM
C/O Dawn Dahlman-Schwab
PO BOX 20881
Greenfield, WI. 53220-0881
(414) 235-3153
dawnslearn2sk8@gmail.com

FIRST NAME: _____ LAST NAME: _____ MALE:___ FEMALE:___ OTHER:___
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ APT # _____
PHONE NUMBER: (____) _____ - _____ BIRTHDATE: ____/____/____ AGE: _____ EMAIL: _____

How did you hear about the “SKATE WITH US” Program? _____

I would like to enroll in the following seven week series...

- _____ October 23, 2024 – December 11, 2024
(No class November 27th)
- _____ January 8, 2025 – February 19, 2025
- _____ February 26, 2025 – April 9, 2025

As Parent, Guardian or Adult skater (18 years or older), I assume and discharge all financial obligations of enrollment and acknowledge all lessons are given as a group (not private) and all enrollment fees are non-refundable. Refunds are given only in the event of an injury/illness requiring hospitalization, or cancellation of classes by the Greater Milwaukee FSC due to lack of enrollment. All requests for refunds must be made in writing and proof of injury/illness is required. Remember all fees are **NON-REFUNDABLE**. There will be a \$35.00 fee for any returned checks.

I hereby waive, release and discharge all instructors and officers of the Greater Milwaukee FSC Skate With US Program for any and all claims for damage and/or all injuries arising as a result of his/her affiliation with the Greater Milwaukee FSC Skate With US Program.

Signature of Parent/Guardian or Adult Skater

(For GMFSC Office use only)

CLASS LEVEL: SNOWPLOW SAM _____ BASIC _____ FREESKATE _____ HOCKEY _____ POWER _____
DATE REC'D: ____/____/____ **RE-ENROLLMENT:** _____ **NEW ENROLLMENT:** _____
REGISTRATION FEE: \$ _____ **PAID BY:** CASH _____ CHECK _____ CK# _____