

LEARN TO SKATE - Summer Camps 2021

	CORAL RIDGE							
Cai	mper Information							
Cai	mper Name:			Camper's Birthdate:				
Cai	mper's Grade in Se	pt 2021:	Camper	r's School:_				
Par	rent/Guardian 1:			Parent/Guardian 2:				
Pho	one 1:			Phone	2:			
Add	Address: City:			St		State:	Zip:	
Email:								
					n, please i	make legible.)		
Who is authorized to pick up child from camp? No child can sign out an their own								
	Person(s) identified below My child can sign out on their own							
Please list full name (s) and relationship to camper: Name: Relationship:								
Name:Relationship:								
Chi	ild's Special Conce	rns/Needs:						
Camper's Skating Level:								
New to Skating Beginner Basic 1-2 Basic 3-4 Basic 5-6 Basic 7-8 Freestyle								
				USFSA te	st levels pa	assed (if any):		
CAMP DATES: Check all you plan to attend - Camps are from 9:00am-4:00pm on the dates below								
	Dates	Tuition	By Ju		er June 1		I	
	June 14-18	1 Week	\$200			Meals Early Drop-off	\$7/day	
	June 21-25 July 12-16	2 Weeks	\$380	\$40		(after 7:30am)	\$6/day	
	July 19-23	3 Weeks 4 Weeks	\$560 \$710	\$5 [,] \$7!		Late Pick-up)	
	Aug 2-6	5 Weeks	\$850	•		(before 5:30pm T-shirt) \$6/day Included	
	Aug 9-13	6 Weeks	\$1,000		060			
T-Shirt Size (please select one):								
		M L Adult	S	M L	XL			
Waiver and Release ASSUMPTION OF RISK: I am aware that ice skating involves certain inherent risks, dangers and hazards which can result in serious personal injury or death. I am also aware that ice skating rinks and are				PAYMENT INFORMATION: Full payment must accompany your registration form. Partial refunds, minus a \$25/camper/week administrative fee, are available prior to your session. There will be no refunds once your session has begun. If necessary, you may change your session dates, subject to enrollment and availability. Total				
dangers that can cause serious injury or death. I hereby freely agree to assume and accept all known and unknown risks of injury arising out of				Camp Tuitio	on	_# of weeks	\$	
ice skating activities. I recognize and acknowledge that risks of ice skating can be greatly reduced by: taking lessons, abiding by the Responsibility Code and using common sense.				Early Drop-	off	# of days x\$6	\$	
PHOTO RELEASE FOR MINOR CHILDREN (Under 18): I, as parent or official guardian of the skater listed above, hereby grant permission to The Rink at				Late Pick-u	o	# of days x\$6	\$	
Coral Ridge Mall representatives, to take and use: photographs and/or digital images of my child for use in news releases and/or educational materials				Meals		# of days x\$7	\$	
as follows: printed publications or materials, electronic publications, or Web sites. I agree that my child's name and identity: may be revealed in descriptive text or commentary in connection with the image(s). I authorize the use				TOTAL	TOTAL \$		\$	
of th	nese images without compensati	on to me. All negatives, prin erty of The Rink at Coral Ride		1				

Parent's Signature: