Skating Academy Registration & Contract

- ☐ New Student
- ☐ Returning Student
- ☐ Trial Class
- ☐ Information Update

Semester: _____/_____ to _____/_____

27745 N. Smyth Dr.
Valencia, CA 91355
(661) 775-8686 phone
(661) 775-8681 fax
www.icestation.net

Skater's Name:

Address:

City: **State:** **Zip:**

Date of Birth: / / **Gender: (Circle One)** **Male** **Female** **Age:**

Home Phone: ( ) **Alternate Phone:** ( )

Mother's Name: **Mother's Phone:** ( )

Father's Name: **Father's Phone:** ( )

Emergency Contact: **Emergency Phone:** ( )

E-mail Address:

OFFICE USE ONLY

Cashier: _____

ENRL Class 1# _____

VCHR Class 1# _____

ENRL Class 2# _____

VCHR Class 2# _____

ENRL Class 3# _____

VCHR Class 3# _____

ENRL Class 4# _____

VCHR Class 4# _____

Paid by: (Please Circle)
Cash VISA M/C
AMEX Check #_____

☐ **Information Verified**

☐ **Contract Verified**

☐ **ISI Verified**

☐ **ISI Date: ____/____**

☐ **Input Computer**

☐ **Receipt Attached**

			Office Use Only
Class #1 Name:	**Day:**	**Time:**	**Tuition:** $
Class #2 Name:	**Day:**	**Time:**	**Tuition:** $
Class #3 Name:	**Day:**	**Time:**	**Tuition:** $
Class #4 Name:	**Day:**	**Time:**	**Tuition:** $
For Pro-Rated Tuition Include Remaining # of Weeks: _____		**Subtotal:**	$
		Annual Fee:	$
M/C M/E E10 E5 Other:_____		**Discount Detail:**	$
		TOTAL AMOUNT DUE:	$

PLEASE READ AND SIGN CONTRACT ON REVERSE
ENROLLMENTS NOT ACCEPTED WITHOUT SIGNATURE

The Skating Academy at ICE STATION VALENCIA

Skating Academy Contract

TERMS & CONDITIONS OF ENROLLMENT

1. The Skating Academy at Ice Station Valencia reserves the right to combine classes and/or change any class day and/or time. Classes with less than 3 students may be canceled.
2. Enrollment card must be presented for skater check in at the box office or front desk before each class or public session. Admission sticker is required for admittance to public session and classes. NO EXCEPTIONS.
3. Skating Academy will not replace lost, misplaced or stolen vouchers. NO EXCEPTIONS.
4. Skaters are allowed a maximum of three (3) "make up" classes per semester for any absences. Make-up classes must be taken during the semester for which the classes were purchased and will not carry over into future semesters. No credit or refund is offered for missed classes.
5. Registrations are not transferable. NO EXCEPTIONS.
6. Cancellations must meet the following: _____ (Initial to accept items a through g)
   a. A signed and completed "Refund Request Form" must be delivered to the Skating Academy Director by the end of the third (3rd) week of classes.
   b. Annual administrative fees are non-refundable.
   c. Enrollment card and any unused vouchers must be attached to the "Refund Request Form." Any used public session vouchers will be deducted from the refund amount at the current regular public session rate.
   d. All regularly scheduled classes held by the date of the request, whether attended or not, will be deducted from the refund amount.
   e. Cancellation fee of $10 will be deducted from the refund amount.
   f. Refund requests submitted after the third (3rd) week will be accepted only for medical reasons, must have a doctor's note attached and are subject to management discretion.
7. **ATHLETIC WAIVER:** The student and parent or legal guardian understand that ice skating, like most athletic activities, has a degree of unpredictability and risk involved and that injuries can and sometimes do occur. The student and parent or legal guardian understand and assume all risks involved in the activity for which the student is enrolled and agree that neither Ice Station nor any of its employees and/or subcontractors shall be liable for any injuries that may occur to the student or with regard to any damage to personal property, and agree to indemnify and hold Ice Station and its employees/subcontractors harmless from any claims, damages and costs, including reasonable attorney fees, that may arise out of student participation in this activity. ***Annual administration fee includes membership in the Ice Skating Institute and is required for all participants.***

I have read, and agree to abide by, all of the above Skating Academy at Ice Station terms and conditions of enrollment.

Printed Name: _____ Date: _____
(Skater or Parent/Legal Guardian if skater is a minor)

Signature:_____
(Skater or Parent/Legal Guardian if skater is a minor)

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