

# 2017-2018 Ice Block Package for *Collegiate Members*

Skating Club of Central New York  
5575 Meltzer Court, Suite 9, Cicero, NY 13039

**BLOCK #** \_\_\_\_\_

Name:	Birth Date:	US Figure Skating Member Number:
Street:	City:	State & Zip:
Parent/Guardians Name:	Email:	Emergency Contact:
Home Skating Club:	Home Phone:	Cell Phone:
Main Coach:		

The use of Cicero Twin Ice Rinks could result in personal injury. The parent and/or guardian, or skater if over 18, assumes all risks of personal injury or damage to the skater and/or his/her property that he/she may suffer by using the Cicero Twin Ice Rinks. The parent/guardian/skater further acknowledges that since they or their child is using the New Dimensions Property/Cicero Twin Ice Rinks at their own risk, the Skating Club of CNY bears no responsibility of any nature for any personal injury, damage or loss to my person or property arising out of or resulting from their visit to the Cicero Commons. As parent/guardian, or skater over 18, I expressly acknowledge my understanding and acceptance of the information contained in the registration packet and agree to assume all risks of any personal injuries whatsoever that my son/daughter or I may incur during the use of the New Dimensions Property/Cicero Twin Rinks/Skating Club of CNY skating sessions.

Parent or Skater over age 18 signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Package Payments:** To receive the package rate, Collegiate members must purchase a minimum of 10 sessions. Collegiate Members may use the sessions over any blocks during the current skating season, but must purchase a new package once all sessions in the prior package have been used. Collegiate members must purchase a new package at the start of the next skating season (July 1<sup>st</sup>). Collegiate packages purchased without the minimum number of sessions will be charged the walk on rate. You may add to your package at any time. Home Club members and guest skaters may purchase packages.

**Package payment must be paid at the time of submittal of this ice package form to the SC of CNY.**

**Walk on Fee:** Skaters without packages will pay **\$12** for a 45 minute session and **\$22** for a 1 ½ hour session.

**Sessions:** All sessions are “open” to any skating level or age skater. Sessions will follow the schedule. Skaters remaining on the ice for any portion of a session will be charged for the 45 minute session. Coaches try to schedule lessons within the 45 minute skating sessions each day. If your lesson continues from the end of one session into the next 45 minute session, you will be charged for the full additional session.

**US Figure Skating member:** All skaters must be registered with a US Figure Skating Club to prior to skating on our ice. If you have questions about membership contact Kim Zdrojewski at [kzdro@yahoo.com](mailto:kzdro@yahoo.com).

Check our web site and the Club desk in the rink lobby for any ice schedule changes or other club information and updates.

***Before you step on the ice, be sure to check in with the monitors to let them know your name and the sessions you are skating.***

**Non Home Club** Skater's Name: \_\_\_\_\_ Date: \_\_\_\_\_ Block #: \_\_\_\_\_

Block Number	Block Dates	Weeks per Block
1	Sept 11 – Nov 15	10 weeks
2	Nov 20 – Jan 31	10 weeks
3	Feb 5 – Apr 12	10 weeks
4	Apr 16 – Jun 28	11 weeks
Summer Block	July 9 – Aug 30	8 weeks

**Ice Schedule Septmeber 11, 2017 – August 30, 2018**

Monday	Tuesday	Wednesday	Thursday
4:00 - 4:45 PM	4:00 – 4:45 PM	3:45 – 4:30 PM	4:00 - 4:45 PM
4:45 – 5:30 PM	4:45 – 5:30 PM	4:30 – 5:15 PM	4:45 – 5:30 PM
5:30 – 6:15 PM	5:30 – 6:15 PM	5:15 – 6:00 PM	5:30 – 6:15 PM
6:15 – 7:00 PM	6:15 – 7:00 PM	6:00 – 6:30 PM	6:15 – 7:00 PM

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Session Length	Number of sessions	Cost per Session	Cost for each session group (Cost X # of Sessions)
30 minute session		<b>\$8</b>	\$
45 minute session		<b>\$10</b>	\$
1 ½ hour session		<b>\$18</b>	\$
<b>Sub Total</b>			\$
<b>Current Block Total</b>			\$
Unpaid Balance – Previous Block # _____			\$
Please make your check payable to “ <b>SC of CNY</b> ” <b>Total Due</b>			\$
Amount Paid _____	Date Paid _____	Receipt # _____	Check # _____
			Cash <input type="checkbox"/> Credit <input type="checkbox"/>

**Attendance Record**

**30 Minute Sessions:**

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**45 Minute Sessions:**


**1 ½ Hour Sessions:**


**Unpaid Balance at End of Current Block \$ \_\_\_\_\_**