



Ron Shaver & Team Winter Club
Spring 2010 School – Sanctioned by Skate Canada

Sunday, April 25, 2010 – Thursday, June 3, 2010
 (No ice on Sunday, May 23rd)

Sessions from April 25th – 29th held at Rex Stimers Arena
Sessions from May 2nd – June 3rd held at Seymour Hannah Sports Complex, Rink 2

REGULAR SCHEDULE

<u>MON</u>	<u>TUES</u>	<u>WED</u>	<u>THURS</u>	<u>SUN</u>
4:25 – 5:45 LOW FS	4:15 – 5:45 HIGH FS	4:25 – 5:45 LOW FS	4:25 – 5:15 HIGH FS	10:55 – 11:45 HIGH FS
5:45 – 5:55 FLOOD	5:45 – 5:55 FLOOD	5:45 – 5:55 FLOOD	5:15 – 5:25 FLOOD	11:45 – 11:55 FLOOD
5:55 – 6:45 HIGH FS	5:55 – 7:15 LOW FS	6:00 – 6:45 CANSKATE	5:25 – 6:15 HIGH FS	11:55 – 12:45 HIGH FS
6:45 – 6:55 FLOOD	7:15 – 7:25 FLOOD	STARSKATE	6:15 – 6:25 FLOOD	12:45 – 12:55 FLOOD
6:55 – 7:45 HIGH FS ***	7:25 – 8:45 ADULT	6:45 – 8:15 HIGH FS	6:25 – 7:45 LOW FS	12:55 – 2:15 LOW FS
				2:15 – 3:00 CANSKATE
				2:30 – 3:15 STARSKATE

*****SCHEDULE MON APR 26*****

4:55 – 6:15 LOW FS
 6:15 – 6:25 FLOOD
 6:25 – 7:15 HIGH FS
 7:15 – 7:25 FLOOD
 7:25 – 8:15 HIGH FS

*****SCHEDULE THURS APR 29*****

5:55 – 6:45 HIGH FS
 6:45 – 6:55 FLOOD
 6:55 – 7:45 HIGH FS
 7:45 – 7:55 FLOOD
 7:55 – 9:15 LOW FS

*** HIGH FS – PASSED COMPLETE SR. BRONZE FS TEST OR 13 YEARS OF AGE

- TEST DAY THURSDAY, JUNE 3, 2010
- ALL SKATERS ARE REQUIRED TO TAKE AT LEAST ONE (1) PRIVATE LESSON PER WEEK FROM A PROFESSIONAL COACH TEACHING AT THIS SCHOOL.
- COACHES MAY TEACH OFF SESSION PENDING APPROVAL. SKATERS ON THE ICE FOR LESSON ONLY.
- SESSIONS LIMITED TO 24 SKATERS AND APPLICATIONS ACCEPTED ON FIRST COME BASIS.
- GUEST SKATING AVAILABLE AT \$25.00 PER SESSION UNLESS SESSION IS FULL
- MISSED SESSIONS ARE NOT REFUNDABLE.
- WE RESERVE THE RIGHT TO ADJUST THE SCHEDULE IF NECESSARY.
- **PAYMENT:**
 - **50% of TOTAL payable by March 25th**
 - **Post dated cheque for balance payable on April 25th**

**PLEASE MAKE CHEQUES PAYABLE TO: RON SHAVER and TWC. CHEQUES ACCEPTED IN PERSON OR MAIL TO: Ron Shaver
 783 Steele Street
 Port Colborne, ON
 L3K 4Z4**

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REGISTRATION FORM

PACKAGE PRICING: PLEASE CIRCLE REQUESTED DAYS

HIGH:	FULL (5 DAY PER WEEK)										\$ 625.00
	4 DAY PER WEEK	MON.	TUES.	WED.	THURS.	SUN.					\$ 570.00
	3 DAY PER WEEK	MON.	TUES.	WED.	THURS.	SUN.					\$ 445.00
	2 DAY PER WEEK	MON.	TUES.	WED.	THURS.	SUN.					\$ 305.00
LOW:	FULL (5 DAY PER WEEK)										\$ 460.00
	4 DAY PER WEEK	MON.	TUES.	WED.	THURS.	SUN.					\$ 405.00
	3 DAY PER WEEK	MON.	TUES.	WED.	THURS.	SUN.					\$ 315.00
	2 DAY PER WEEK	MON.	TUES.	WED.	THURS.	SUN.					\$ 220.00
ADULT:	1 DAY PER WEEK		TUES.								\$ 115.00

IF SELECTING SUN or MON ON 2 – 4 DAY PACKAGES, PLEASE DEDUCT \$20.00 / DAY FOR THE HIGH SESSION AND \$15.00 / DAY FOR LOW SESSION TO COMPENSATE FOR APR 23 & 24. **DEDUCTIONS HAVE ALREADY BEEN TAKEN ON FULL PRICING.**

PLEASE COMPLETE THE FOLLOWING:

SKATER NAME _____ PARENT NAME _____
 ADDRESS _____
 CONTACT #s: H _____ C _____ EMAIL _____
 SKATE CANADA # _____ HEALTH CARD # _____
 HOME CLUB _____ PROFESSIONAL _____
 HIGHEST COMPLETE TEST PASSED _____
 FORM OF PAYMENT: CHEQUE _____ CASH _____

CONSENT

I, _____ consent to (skater's name) _____ participating in the activities of The Winter Club of St. Catharines and hereby release and forever discharge The Winter Club of St. Catharines and their agents, being all Coaches, Directors, Officers, Volunteers, Members, Staff successors and/or assignees of and from all claims, damages, actions or causes of action arising by reason of participation of (skater's name) _____ in skating or other club activities and from all claims or demands whatsoever in law or in equity which I, my heir, executors, administrators, or assignees can, shall or may have because of such participation.

 Signature of Parent or Applicant (if over 18 years of age) _____
 Date

HARNES WAIVER

(must be signed prior to using the harness)

I, _____ give permission for my daughter/son, _____ to use the harness at The Winter Club of St. Catharines. I understand that The Winter Club of St. Catharines will not be held liable for any injury that may occur while using this device.

 Signature of Parent or Applicant (if over 18 years of age) _____
 Date

OUT OF CLUB TEST PERMISSION

_____ is a member in good standing of the _____
 and has received permission to take tests at the Winter Club.

 Signature of Club Official _____
 Date