



**PPFSC *Learn to Skate USA* Program  
2017-18 Registration & Membership**



**This form needs to be completed only one time between 7/1/17-6/30/18.**

**Please print all information clearly. Use one form for each skater.**

Skater's Name: \_\_\_\_\_ D.O.B. : \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Gender: Female Male

City, State, ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ \_\_\_ home \_\_\_ cell

Is the skater a U.S. citizen? \_\_\_ yes \_\_\_ no

Email Address: \_\_\_\_\_

Parent or Guardian's Name: \_\_\_\_\_

Are there any medical or learning issues that may affect the skater or the program of which we need to be aware? \_\_\_ no \_\_\_ yes Please explain. \_\_\_\_\_

For skaters new to PPFSC Basic Skills: Please tell us how you heard about our program.

\_\_\_ website \_\_\_ newspaper ad (which newspaper?) \_\_\_\_\_

\_\_\_ social media \_\_\_ friend \_\_\_ school flyer (which school?) \_\_\_\_\_

**PLEASE READ THIS DOCUMENT CAREFULLY BEFORE SIGNING**

**Acceptance of Risk**

By signing this form, the undersigned acknowledges that participation in the Pawtucket & Providence FSC *Learn to Skate USA* Program involves risks that may include permanent injury. While caution on the part of the skater and use of protective gear may reduce this risk, the chance of serious injury is within the realm of possibility. PPFSC reserves the right to refuse admission to or dismiss from its program any skater whose conduct is disruptive or poses a danger to the safety of others. The undersigned acknowledges and accepts these risks and agrees to hold harmless the Pawtucket & Providence Figure Skating Club as well as its directors, officers, agents and rink employees in so far as the laws of the State of Rhode Island permit. The undersigned accepts the stated risks and limitations and must be at least 18 years of age. For minors under the age of 18, a parent or guardian must sign and accept the risks and limitations for their child. Signing this document is a binding legal contract.

**Model Release**

I, the undersigned parent/guardian of the skater named in this registration, hereby grant the Pawtucket & Providence Figure Skating Club and all persons acting with its permission, the right to take and use Model's photograph/performance for advertising, promotion or any lawful purposes.

I have read and understand the Acceptance of Risk and the Model Release for the above-named skater.

Signature: \_\_\_\_\_

**PPFSC Learn to Skate**  
**2018 Olympic Special Winter Session Registration**  
**Schneider Arena, Providence College**

Please be sure to complete the previous page if you have not done so this year.

Skater's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

For skaters new to our program: Have you ever skated before? \_\_\_ yes \_\_\_ no

Have you ever had lessons? \_\_\_ yes \_\_\_ no

If yes, what was the highest level passed? \_\_\_\_\_

**Please choose the class for which you are registering. All skaters who are new to our program since July 1 must also check the Learn to Skate Registration Fee.**

*\*Please note that there are no further discounts or coupons that can be applied. These prices reflect the lowest available for this session, even lower than with a coupon.*

		Cost, for registration received:	
Please check.  ✓	See our website for details about classes.	*By 1/7/18 (discounted rate)	After 1/7/18 (regular rate)
	Learn to Skate Registration Fee (required one time during 7/1/17-6/30/18)	\$25	\$25
	Snowplow Sam all levels	\$42	\$56
	Basic Levels 1-6	\$56	\$70
	Pre-Freeskate	\$70	\$84
	<b>TOTAL AMOUNT DUE</b>	\$ _____	\$ _____

**Make checks payable to PPFSC Learn to Skate.**  
**Mail registration forms and payment to:**

**PPFSC Learn to Skate**  
**P.O. Box 85**  
**Pawtucket, RI 02862**

For PPFSC use:
Form of payment:
Cash _____
Check # _____
Received by _____