



LEARN TO SKATE USA



Registration \$70.00/skater Basic Skills, Freeskate, Adult Classes, Skating Skills*
Skaters can add Skating Skills as a 2nd class for \$35

*Each Skater must also have a current Learn to Skate USA membership. Register at learntoskateusa.com

Learn to Skate Monday Classes

March 9, 16, 23 (NO 30) April 6, 13, 20, 27

All skaters 6 years and under should wear a helmet. There are no make up classes. The Director reserves the right to merge classes as necessary, in the event there is only one skater enrolled the class will be taught as a 10min private lesson. Gloves or mittens and comfortable

Please circle the classes desired. One form per skater.

Monday Class 5:30-5:55 pm	Snowplow Sam 1 & 2 Skaters 3 & 4 years old Parents may participate but MUST have a current LTS USA membership		Basic 1	Basic 2	Basic 3	Adult Skaters Class
5:55 -6:05 pm	All Classes Free Practice Time					
Monday 6:05 - 6:30 pm	Basic 4	Basic 5	Basic 6	Pre- Freeskate	Freeskate 1	Freeskate 2
Monday 6:30 - 7:00 pm	Skating Skills Class Skaters will work on skills and test patterns for USFS Skills Tests. This Class is a recommended addition for all skaters Basic 5 and up.					Advance Turns Skaters passed Pre-Bronze SS

Skater _____ Age _____ Birthdate _____

Skater Learn to Skate USA # _____

Parent / Guardian Name: _____ E-mail _____

Address _____

City _____ State _____ Zip _____

Phone: _____ Emergency contact _____ Phone _____

Waiver Form: I hereby represent and certify that the age of the registrant listed above is correct and acknowledge and agree that the registrant is physically fit to engage in both structured and unstructured activities at the Taylor Sportsplex. I acknowledge the inherent risk of serious physical injury or even death associated with skating activities and I hereby release, discharge, and agree to indemnify and hold harmless the Taylor Sportsplex, its owners, managers, affiliates, and employees from any and all claims by or on behalf of the registrant arising from registrant's participation in any Taylor Sportsplex program. I hereby represent and certify that as the parent or legal guardian of the participant I hereby consent to any and all emergency medical care for the participant.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

For questions please contact us: learntoskateTSX@gmail.com or 734-374-8900



13333 Telegraph Rd, Taylor, MI 48180