

FREESKATE REGISTRATION
2009-2010
Junior, Intermediate & Senior STARSkaters
Please indicate your freeskate selections

Last Name: _____

Skater's First Name: _____

Phone Number: _____

Email Address: _____

Parent/Guardian: (please print) _____

Signature of Parent/Guardian: _____

Date: _____

Freeskates

Junior	Monday 5:10 – 6:10 pm	_____
	Tuesday 5:00 – 6:25 pm	_____
	Friday 5:25 – 6:35 pm	_____

Intermediate	Tuesday 3:30 – 5:15 pm	_____
	Friday 5:25 – 6:35 pm	_____

Senior	Monday 3:30 – 5:00 pm	_____
	Tuesday 3:30 – 5:00 pm	_____
	Friday 3:30 – 5:15 pm	_____

Senior/Adult	Tuesday 6:25 – 7:25 pm	_____
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