

# STOUFFVILLE SKATING CLUB

## 45th ICE REVUE REGISTRATION FORM

Show dates: Friday, May 7<sup>th</sup>, 2010 @ 7p.m. and  
Saturday, May 8<sup>th</sup>, 2010 @ 2p.m. & 7p.m.

SKATER: \_\_\_\_\_ D.O.B. \_\_\_\_\_ M or F  
 Parents: \_\_\_\_\_ Tel # \_\_\_\_\_  
 Email address: \_\_\_\_\_

Session and fees (please circle the appropriate session)

PreCanskate Tuesday - \$35	PreCanskate Thursday - \$35	PreCanskate Friday - \$35
CanSkate Monday - \$40	CanSkate Tuesday - \$40	CanSkate Thursday - \$40
CanSkate Friday - \$40		
Junior - \$75	Intermediate - \$75	Senior - \$100

Type of Payment:    **Cash**    **Cheque** (payable to Stouffville Skating Club)    **Visa**    **Mastercard**

Credit Card # \_\_\_\_\_ Expiry Date MM/YY \_\_\_\_\_

Name on card \_\_\_\_\_ Signature \_\_\_\_\_

I hereby apply to skate in the S.S.C. Ice Revue on May 7<sup>th</sup> & 8<sup>th</sup>, 2010. I understand that I skate of my own risk and there is no liability on the part of the S.S.C. or its directors, and furthermore, I agree to abide by the by-laws and regulations of the club constitution.

Parent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Skater Measurements (all information must be filled in):**

Child 4 6 8 10 12 14      Adult S    M    L    XL

**Chest:** \_\_\_\_\_ inches    **Waist:** \_\_\_\_\_ inches

**Height:** \_\_\_\_\_ feet \_\_\_\_\_ inches      **Weight:** \_\_\_\_\_ lbs

**PARENTS - VOLUNTEERS are needed! We need your participation!**

**Please check all areas below that you are interested in helping with.**

\_\_\_ Program Advertising    \_\_\_ Ticket Sales      \_\_\_ Photo Sales    \_\_\_ Dressing Room Parents

\_\_\_ Show Set up (Wed. May 5<sup>th</sup> daytime)      \_\_\_ Photo Night Co-ordinator (Thurs, May 6<sup>th</sup>)

\_\_\_ Security    \_\_\_ Flower Sales    \_\_\_ Show Tear Down (Sat. May 8<sup>th</sup>)    \_\_\_ Ushers

\_\_\_ Dressing Room Supervisor    \_\_\_ Ice Captain

**QUESTIONS? Call Lesley @905-640-1960 or Anita @905-640- 2654  
iceshow@stouffvilleskate.com**

