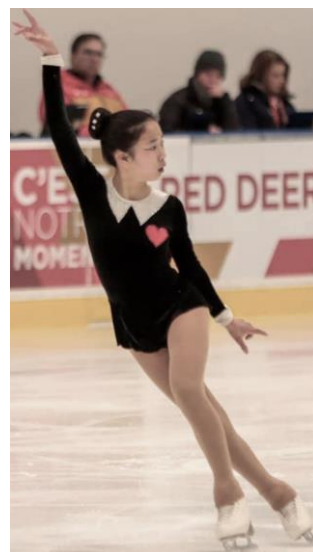


FutureStar Summer Skating Camp

Centennial Arena Halifax



9:00-9:30	Arrive and join Group C & B for break
9:30-10:20	Off-Ice
10:20-10:30	Break/Change
10:30-11:30	On-Ice
11:30-12:10	Lunch / Pick Up time

4 Weeks

3 times a week

(Tuesday, Wednesday & Thursday)

Week 1 ~ July 9,10,11

Week 2 ~ July 16,17,18

Week 3 ~ Aug 6,7,8

Week 4 ~ Aug 13,14,15

Summer Administrative Coach
Kyla McNeil Upton
Kyla.upton.dsc@gmail.com

Off-ice Sessions include – Yoga, Skipping with Skip NS, Dance with Coastal Dance, Atlantic Cirque, Endurance and Conditioning.

Wednesday is theme day (Crazy Hair, Neon Day, Twin day)



Cost Per Week: \$90.00 OR ALL 4 Weeks FOR \$320.00

The registration deadline is **June 1st**. **DSC Skaters have priority until May 15th**. Late applications will be subject to a **\$25 fee**. An email address must be included on the registration form as confirmation and all other communication will be provided by email. Confirmation will not be provided without a valid email address. **Fees must be paid in full prior to the skater stepping on the ice.**

All past due fees must be paid in full prior to registration being accepted.

The Dartmouth Skating Club reserves the right to add, delete or modify sessions depending on registration and is not responsible for skaters not picked up within 15 minutes of the end of their session. All skaters are required to be members of Skate Canada and pay a Skate Canada fee of \$36 per skater per year in addition to program fees. This fee is non-refundable. This membership is valid from September of 2018 until August of 2019. If you're not a current member, then add \$36 to the fees noted on the brochure.

Mail Applications to:
Kyla Upton / DSC
11 Bligh St, Dartmouth NS
B3A 1K8

Summer Skating Camp 2019

Skater's Name _____ Gender _____

Parent/Guardian's Name _____

Mailing Address _____

City _____

Province _____ Postal Code _____

Email Address _____

Telephone # (H) _____ (W) _____ Emergency _____

Birth date: Day _____ Mo _____ Yr. _____

Home Club _____

Coach _____ Phone # _____

Would you like private lessons? – YES OR NO

Allergies _____

Health Card Number _____

Highest complete CanSkate Badge _____

Circle Week/Weeks: 1 2 3 4

Payment by Cheque/Cash/Money Order or EMT

EMT- dartmouthskatingclubdsc@gmail.com Password- Summer2019

Payment #1 Due June 14th

Payment #2 (If buying 3 or more weeks) Due July 5th

Provide the total cost for Week/Weeks buying: _____