

Carnival of Silver Skates 2017 Registration Form

Please complete the following information for each skater:

**Skater cell phone numbers are only used for instructors to contact skaters and vice versa.*

School District: _____

Name: _____ Age: _____ Grade: _____ Gender: F M

Skater's Cell Number _____

Name: _____ Age: _____ Grade: _____ Gender: F M

Skater's Cell Number _____

Name: _____ Age: _____ Grade: _____ Gender: F M

Skater's Cell Number _____

Name: _____ Age: _____ Grade: _____ Gender: F M

Skater's Cell Number _____

Family Information:

Parents' Name/Contact Person: _____

Cell Number: _____ Home Number: _____

E-Mail Address: _____

***e-mail is our PRIMARY means of communication. Please include if you have one. Thanks!**

Costs:

Registration Fees: \$25 for the first skater and \$20 for each additional skater in the immediate family, due at registration.

Costume Deposit: \$50 per skater, due at registration. Checks will not be cashed and will be returned upon return of complete, undamaged costumes.

Make checks payable to: CSS.

Please pay Costume Deposit with a separate check from Registration Fees.

**We hold the costume deposit check and return it to you upon return of your complete costume(s).*

Registration and payment must be made in person on September 11th or 12th.

**No mail-in registration is allowed because we need to measure skaters upon registration.*

**Registrations will NOT be taken after these dates due to planning and preparation.*

Please note **girl skaters in 7th grade and up** will need to have a flesh-colored body suit for the Carnival. If you would like us to order one for you at your own cost (approximately \$35), you will need to be measured for one at costume measuring. The deadline for ordering is September 15th. **Payment is due at costume hand-out on January 7th.**

Please check one:

Yes, I would like to order a body suit.

No, I do not need a body suit.

I (we) have read the aforementioned policies and agree to abide by these policies related to the Carnival of Silver Skates.

Skater Signature: _____

Skater Signature: _____

Skater Signature: _____

Skater Signature: _____

Parent Signature: _____

Yes! Skaters are interested in participating in the **free Skating Clinic** to be held in Groton January 2nd at the following level (please note number of skaters in each level):

Beginners ___ Advanced Beginners ___ Intermediates ___ Skaters ___

Registration Fees FAMILY TOTAL: \$ _____

Payment Method: Cash _____ **OR Check #** _____

Costume Deposit FAMILY TOTAL \$ _____

Check # _____

Checks should be made out to: CSS or Carnival of Silver Skates.



Search for our page "Silver Skates"!