

Cedar Valley Figure Skating Club Fall Ice Contract
September 8-December 19, 2011

*** GROUP LESSON OPTIONS ***					
Select	Session	Time	# of Sessions		Total
	Monday Learn to Skate	5:30-6:15 pm	12		\$ 135.00
	Monday Artistry in Motion	5:30-6:15 pm	12		\$ 160.00
	Saturday Learn to Skate	9:00-9:45 am	12		\$ 135.00
	Saturday Low Jumps & Spins	9:00-9:45 am	12		\$ 160.00
*** FREESTYLE OPTIONS ***					
<p>General Rules: Skaters may choose one of three freestyle ice options. Number of freestyles to skate per week are for information purposes only. Skaters may skate any number of freestyles each week as long as total freestyles skated during contract period do not exceed the maximum listed for chosen option. Example: With the 1 freestyle option you may choose to skate 2 freestyles one week to make up for not skating any freestyles during a different week.</p> <p>All freestyles on any option must be skated during this contract period. Unused freestyles will not be carried over to subsequent contract periods or refunded.</p> <p>Individual freestyles can be purchased at a walk-on rate of \$20.00 at any time</p>					
	1 Freestyle per week - 12 total sessions				\$ 180.00
	Skate an average of 1 freestyle per week. Total freestyles skated during contract period cannot exceed 12. (Average cost per freestyle \$15.00)				
	3 Freestyles per week - 36 total sessions				\$ 425.00
	Skate an average of 3 freestyles per week. Total freestyles skated during contract period cannot exceed 36. (Average cost per freestyle \$12.00)				
	6 Freestyles per week - 72 total sessions				\$ 550.00
	Skate on all freestyle sessions offered during the entire contract period. (Average cost per freestyle \$8.00)				
	Total Ice Fees				\$

A signed ice contract must be received by CVFSC before skaters are allowed on Club Ice.
 Even if not skating, the skater will be responsible for paying contracted ice time unless release
 of this contract is approved by CVFSC Board of Directors.

By signing, I understand I am responsible for paying all contracted ice as indicated above.

Skaters Name (please print) _____

Signature _____

Total Fees Paid with contract

1/2 Fees Paid with contract, second 1/2 payment due 11/1/11

Please make checks payable to CVFSC and return to CVFSC PO Box 1052 Waterloo, IA 50704