



# 2015-2016 REGISTRATION FORM

## Kindersley Skating Club –CanSkate

SKATER’S NAME: \_\_\_\_\_  Female  Male

DATE OF BIRTH: \_\_\_\_\_ (MMM-dd-yyyy) SK HEALTH CARD#: \_\_\_\_\_

PARENT/GUARDIAN NAME(S): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_ RM #: \_\_\_\_\_

TELEPHONE: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Does your child have any food allergies and/or medical conditions that we should be aware of:

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**Sask Sport Inc. Aboriginal Voluntary Self Declaration:**

Note: The following is voluntary. The data will be used to identify success within Sask Sport Inc. program and service areas. Please check one of the following that is most applicable to your Aboriginal ancestry:

Status/Treaty     Non-Status     Métis     Inuit

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**CANSKATE (45 minute sessions)**

Child must be 3 years of age as of Dec 31, 2015

One Day/Week      \$240.00

Two Days/Week      \$320.00

Children will be grouped, by the coaches, according to age, ability and/or interest (ie: hockey, leisure, figure skating).

CANSKATE begins Monday, October 26, 2015

Please choose your preferred day(s) (maximum 2)

Tuesday Afternoon       Monday Morning  
 Thursday Afternoon       Thursday Morning

Returning skaters: Please indicate last level passed:

\_\_\_\_\_



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**Payment Options:**

- Cheque payable to **Kindersley Minor Sports (KMS)**. Returned Cheque Fee is \$25.00.
- All payments must be completed by Dec 01, 2015.

Full Payment      Amount: \$ \_\_\_\_\_      Chq Date: Sep 15, 2015      CHQ#: \_\_\_\_\_

**OR:**

1<sup>st</sup> Payment Amount: \$ \_\_\_\_\_      Chq Date: Sep 15, 2015      CHQ#: \_\_\_\_\_

2<sup>nd</sup> Payment Amount: \$ \_\_\_\_\_      Chq Date: Nov 01, 2015      CHQ#: \_\_\_\_\_

3<sup>rd</sup> Payment Amount: \$ \_\_\_\_\_      Chq Date: Dec 01, 2015      CHQ#: \_\_\_\_\_

- Additional funding may be available through KIDSPORT and/or JUMPSTART. Applications are available from Kindersley Minor Sports office. Please check if you are applying .
- Administration Fee and Skate Canada Fee are non-refundable.

**Kindersley Minor Sports Fundraising Deposit:** One (1) cheque payable to **Kindersley Minor Sports (KMS)**

1. **\$100.00 (PER SKATER)**      Fundraising Tickets      Chq Date: Sep 15, 2015 CHQ#: \_\_\_\_\_

**Kindersley Skating Club Fundraising Deposit:** Two (2) cheques payable to **Kindersley Skating Club (KSC)**

1. **\$100.00 (per family)**      Chocolates/SkateCanada Tickets      Chq Date: Sep 15, 2015 CHQ#: \_\_\_\_\_

2. **\$25.00 (per family)**      Carnival Tickets      Chq Date: Mar 1, 2016 CHQ#: \_\_\_\_\_

**Kindersley Skating Club Volunteer Commitment:**

The Kindersley Skating Club is hosting two events during the 2015-2016 season that require volunteer help from our skating parents. Please indicate which event you are willing to commit your time to assist in the success of these important events for our club.

Jean Norman Competition (Feb 26-28/16)

Annual Skating Carnival (March 18/16)

Further details regarding your specific duties will be forwarded closer to the events.

**Disclaimers:**

I have received and understand the Town of Kindersley's "Zero Tolerance Policy", as well as Kindersley Minor Sports "Code of Conduct", and I will discuss these with my child.

\_\_\_\_\_ Parent/Guardian signature

I grant my permission to Kindersley Minor Sports to publish my child's picture or name on the KMS website or in the local media.

\_\_\_\_\_ Parent/Guardian signature

I understand that failure to fulfil fundraising and volunteer commitments may compromise my child's standing with the Kindersley Skating Club and Kindersley Minor Sports and may affect my child's eligibility to be a member in the future.

\_\_\_\_\_ Parent/Guardian signature      Skater's Name: \_\_\_\_\_