2016-2017 CAFSC Basic Skills Bridge Member Registration

WWW.CAFSC.ORG

WHO SHOULD ATTEND: Skaters that have completed the Learn to Skate Program and want to continue progression into the Basic Skills & Freestyle levels offered with Cape Ann Skating Club membership.

The Cape Ann Skating Club offers 1st year Bridge Membership to skaters wishing to continue learning the skating skills offered beyond the LTS level . Your skater will become part of our Team and will benefit from the skating opportunities that are available with membership into the Ice Skating Institute Recreational Program (ISI). The ISI fosters a spirit of participation, not elimination, so all skaters are rewarded and made to feel successful by developing lifetime skills including a healthy dose of exercise, making friends, and building self-esteem to benefit skaters throughout life. Coaches recommend Basic Skills level skaters to skate 2-3 times weekly to progress along with their peers.

CLUB MEMBERSHIP INCLUDES:

Group and Private lesson ice at discounted member-only rates; three days of ice times to choose from; Coaching by professional skating instructors registered and certified by the Professional Skaters Association (PSA); Enrollment into the Ice Skating Institute Membership (ISI) allows skaters to participate in skills progression testing and advancement, Team competition events, Club shows, and insurance benefits.

BASIC SKILLS MEMBER SCHEDULE

To sign up for **GROUP INSTRUCTION**:

Submit Ice Time Contract along with this registration and choose your group time(s).

CAFSC Group Lesson Ice Schedule Sat. 12:00-1:00pm and/or Tues 6:00-6:50 pm Basic Skills Levels Group Instruction includes the following levels: ISI Pre-Alpha, Alpha, Beta & Delta and low Freestyle: (skating turns, jumps, spins, & edges)

To sign up for PRIVATE INSTRUCTION:

Speak to any of our professional coaches to confirm a private lesson time for your skater. Then submit Ice Time Contract (along with this Application) and select prior confirmed private lesson time ice-time booking with club coach. All members of any age and skating level are encouraged to participate in private lessons which allow for faster progression through the ISI curriculum with one-on-one instruction. Private lessons allow skaters the opportunity to skate to musical programs, advance along with their peers, and participate in shows and competition events. Our Professional Coaching staff would love to offer your skater private or semi-private lessons at any of the Club ice times provided they have openings. See our website at www.cafsc.org for contact information for our coaching staff or speak to any of our coaches before or after your skater's group lesson.

CAFSC Private Lesson Ice Schedule Saturday: 10-11am, 11-Noon, 1-1:50pm Sunday: 8-8:55am and 8:55-9:50am Tuesday: 6:00-6:50pm and 6:50-7:50pm

BRIDGE PROGRAM REGISTRATION

Skaters Name:	
Address:	
City:	State:
Zip:	DOB:
Email:	
Telephone #:	

First Year Bridge Membership FEE: \$35.00 (Please make checks payable to CAFSC)

Additional Required Forms-All Attached

- Ice Time Contract
- Code of Conduct
- Release of Liability & Assumption of Risk Agreement
- CAFSC Media Release Form

Please send completed registration forms along with your payment to: CAFSC, P.O. Box 1193, Gloucester, MA 01930 or submit to Club in person.

Cape Ann Skating Club PO BOX 1193 Gloucester MA 01930



2016 - 2017 ICE CONTRACT

		ISI#	
dress	Phone		
'lease re	wiew your choices with your private coach before subr	nitting.	
Select.	DAY/SESSION	TIME	MEMBERRAM
	SUNDAY - Freestyle. Open to All Members. Lessons & Practice.	8:00 a - 8:55 a	\$16.0
	SUNDAY - Freestyle. Open to All Members. Lessons & Practice.	8:55 a - 9:50 a	\$16.0
	TUES - 20 min Freestyle, followed by 30 min POWER GROUP Class	6:00 p - 6:50 p	\$23.0
	TUES - 20 min Freestyle, followed by 30 min Basic/Teen Class	6:00 p - 6:50 p	\$20.0
	TUES - 30 min POWER GROUP Class, followed by 20 min Freestyle	6:20 p - 7:10 p	\$23.0
	TUES - 30 min Basic Group, followed by 20 min Freestyle	6:20 p - 7:10 p	\$20.0
	TUES COMBO Power or Basic Group Class & 60 min Freestyle	6:00 p - 7:50 p	\$34.0
	TUES: Freestyle. Open to All Members. Lessons & Practice	6:50 - 7:50 p	\$16.0
	SATURDAY - Freestyle. Open to All Members. Lessons & Practice.	10 a - 11 a	\$16.0
	SATURDAY - Freestyle. Open to All Members. Lessons & Practice.	11 a - 12 a	\$16.0
	SATURDAY - 30 Min GROUP (Alpha - Freestyle), 30 min Freestyle.	12 noon - 1 p	\$20.0
	WEEKLYTOTAL		\$

For Office Use: Check#_____ Amount:_____ Date:____ Initials__



CAPE ANN SKATING CLUB /CAFSC: Skater Code of Conduct

Our goal is to maintain a safe and positive environment for all members.

By signing below, I agree that:

- 1. I will conduct myself in a manner that is respectful of all CAFSC policies, as well as any other facility while representing CAFSC, at all times.
- 2. I will help to continue the pride of CAFSC at our home arena, and also at other events, by showing good sportsmanship to other skaters, coaches, officials, parents, rink staff and the general public.
- 3. I will use appropriate language and behavior at all times.
- 4. I will support and encourage my fellow skaters at practice sessions, competitions, test sessions, shows, etc.
- 5. I will be polite and respectful to my coach, as well as the other coaches.
- 6. I understand that use of the figure skating warm room & rink locker rooms is a privilege and I will use appropriate behavior in the rooms, will help to keep them clean, and will respect other's belongings that are left in the rooms.
- 7. I will be considerate of other's feelings and will not engage in any bullying behaviors towards others. I understand that this includes teasing, threats, name calling, menacing harassment or any behaviors that disrupt another student's ability to learn.
- 8. If I feel unsafe or that my rights are being violated, I will notify my coach or a CAFSC board member immediately. I will also help to protect another skater's rights and notify an adult if I am aware of a problem.
- 9. I understand that I have the right to be happy, to have fun, and to excel at this sport. I have the right to feel safe and respected, and that other skaters will follow this code of conduct as well. I have the right to learn at my own pace and to have my coach be respectful of me.

The following procedure will be implemented if a member's behavior does not reflect the code of conduct:

1st offense: A meeting will be set up between the parent, coach and skater. Written notification of the incident will be turned in by the coach to the board.

2nd offense: A meeting will be set up between the parent, coach, skater and CAFSC board. Written notification of the incident will be kept on file.

3rd offense: The CAFSC board will meet to determine your membership privileges.

Skater Name (PRINT)	ISI # / USFS #	
Signed		
Parent/Legal Guardian if skater is under 18		
Date		



CAPE ANN SKATING CLUB/CAFSC: Parent/Guardian Code of Conduct

A Code of Conduct gives everyone a guide to what is expected of us if we are part of a organization, participating in a sport, or as spectators at our child's events.

The essential elements of character building and ethics in sports are embodied in the concept of sportsmanship - This includes respect, responsibility, fairness, caring, trustworthiness and good citizenship. The highest potential of sports is achieved when competition reflects these ideals.

By signing below, I agree that:

- 1. I will encourage good sportsmanship by demonstrating positive support for all skaters, coaches and officials at every practice session, competition and test session.
- 2. I will place the emotional and physical well-being of my child ahead of my personal desire to win.
- 3. I will encourage my child to skate in a safe and healthy environment.
- 4. I will inform my child's coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
- 5. I will do my best to make skating fun and will remember that my child participates in sports for his/her own enjoyment and satisfaction not mine.
- 6. I will ask my child to treat other skaters, coaches, parents, fans, and officials with respect, regardless of race, creed, color, sexual orientation, gender identity, or ability.
- 7. I will be a positive role model for my child and other skaters.
- 8. I will respect my child's coach and refrain from coaching my child or other skaters during competitions, and practices.
- 9. I will respect the decisions of officials during competitions and test sessions.
- 10. I will be supportive of all the opponents in my child's competitions and respect the rights of all skater to participate.

Parent/ Guardian Name (PRINT)	
Signed	
Date:	



Cape Ann Skating Club Media Release

€ I give permission to the Cape Ann Skating Club (CAFSC) to use my/ my child's name, story, pl quoted comments for the purpose of increasing awareness about the CAFSC and its activities articles and photos may appear on the CAFSC's display board at the club rinks, CAFSC websit	s. I further understand that
€ I do not give my permission to use my/my child's name, story, photograph, likeness, and or concepurpose of increasing awareness about the Cape Ann Skating Club (CAFSC) and its activities.	
PARTICIPANTS NAME	
Signature of Skater	Date Signed
Signature of Parent/Legal Guardian (If participant is younger than 18 years old at time of registration)	Date Signed
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Cape Ann Skating Club Emergency Medical Contact Form

Skater Name		
Insurance Carrier		
Subscriber Po		-
ALLERGIES:		
List any physical limitations and/or special instructions	s to inform coaches:	
EMERGENCY CONTACTS - Please list two (2):		
Name:	Relationship to skater:	
BEST PHONE # for immediate contact		
Additional Phone #s		
Name:	Relationship to skater:	
BEST PHONE # for immediate contact		
Additional Phone #s	· · · · · · · · · · · · · · · · · · ·	

Waiver/Release/Assumption of Risk - NO EXPIRATION DATE

Learn to Skate - Associate Member - Bridge Member - Full Member - Dual Member

The undersigned Participant or Parent/Guardian of the identified minor acknowledge and fully understand that Participant will be engaging in activities at the Talbot Ice Rink, Johnson Rink and/or other CAFSC property, and using equipment, harness, props, that may involve risk of serious injury, including permanent, temporary, total or partial disability, death, paralysis, illness or other harm, and that Participant voluntarily engages in such activities with adequate prior knowledge of such risks and dangers.

Such activities may involve ice skating, figure skating and ice sports. Participant or Parent/Guardian acknowledges that participation in ice sports, whether competitive, recreational, or instructional, including use of equipment for such purposes, is a potentially dangerous activity and that inherent in any ice sports is the risk of injury, including through over-exertion or exercise beyond my capability (or that of my child) or from other cause.

If Participant is engaged in a skating program (or other instructional activity) conducted by CAFSC, instructors are available to familiarize Participant with the CAFSC facilities and equipment used for such program and to assist participant in phases of the program.

Participant's assumption and acceptance of risks stated in this document include, but are not limited to, the following general areas:

- 1. Participation in any and all classes or individual instruction at CAFSC.
- 2. Participation in unsupervised activities at CAFSC and any other individual activities.
- 3. The use of any equipment.
- 4. Accidents occurring within auxiliary areas.

Participant acknowledges the existence of, and agrees to abide by, applicable rules, regulations, policies, and procedures of CAFSC. Rules relating to use of the Talbot Rink, Johnson Rink, and other CAFSC facilities may be posted for your information and convenience, but the lack of posting shall not relieve Participant of this obligation.

Participant or Parent/Guardian agree to and do assume all legal and financial responsibility for (i) any and all risks and dangers associated with such activities, (ii) any and all injuries, damages and losses, whether to person or property, and whether physical, psychological, social or economic, that Participant may in any manner and from whatever cause or sustain in connection with such participation, including such injury or damage that may result not only from his/her own actions, inactions or negligence, but action, inaction or negligence of CAFSC or others, or the condition of the premises or of any equipment used and further, that there may be other unknown risks not reasonably foreseeable at this time, and (iii) all treatment, hospitalization and other care rendered to Participant in the event of his/her illness, injury or other emergent circumstance in connection with any such participation.

Participant or Parent/Guardian assume all the foregoing risks and accept personal responsibility for the damages following such injury, including permanent, temporary, total or partial disability, death, injury, illness or other harm.

Participant or Parent/Guardian hereby fully and forever release, discharge, hold harmless and agree to indemnify and not to sue CAFSC, its employees, directors, officers, volunteers, affiliates, representatives, agents, insurers and their respective successors and assigns, from and against any and all liabilities, losses, claims, demands, litigation, damages and judgments, present or future, known or unknown, valid or invalid, direct or consequential (whether physical, psychological, social, economic or otherwise), together with reasonable costs and attorneys fees which (i) result directly or indirectly from injuries, illness, disability (whether permanent, temporary, total or partial), death or other harm to Participant or Participant's and/or Parent's/Guardian's property, or the property of third parties, and (ii) are caused by or result, directly or indirectly, from Participant's conduct, acts or omissions while participating in any activities on or about CAFSC property.

PARTICIPANT FURTHER UNDERSTANDS THAT THIS DOCUMENT MAY NOT BE ALTERED IN ANY	AAANNED MUTUOLIT
THE EXPRESS WRITTEN CONSENT FROM CAFSC AND THAT IF ANY PORTION OF THIS DOCUM	MANNER WITHOUT
INVALID, THE BALANCE SHALL CONTINUE IF FULL FORCE AND EFFECT.	ENT IS HELD TO BE
THE BALLWOL GHALL CONTINUE IF FULL FORCE AND EFFECT.	

Date Participant's Signature		
Parent's/Guardian's Signature (Parent's/Guardian's Signature required if Participant is under the age of	18):	
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