



# 2018-19 Club Ice & Program Registration Fall Session August 28 – November 30, 2018

Adult Skater or Parent/Guardian Information					
Parent/Guardian Name:			Phone:		(cell)
Address:			Phone:		(hm/wk)
City:	State:	Zip:	Email:		
Skater Information					
Skater Name		Circle One			
#1:	M or F	Date of Birth:	Age:	USFS #:	
#2:	M or F	Date of Birth:	Age:	USFS #:	
#3:	M or F	Date of Birth:	Age:	USFS #:	
#4:	M or F	Date of Birth:	Age:	USFS #:	

Skater Name	Power Skating Class <b>Saturdays 11:15-11:45am</b> Sept 15, 22, Oct 6, 13 4 classes <b>\$40</b>  Must be passed Basic 3 or Adult Basic 2 to enroll.  Walk on fee is <b>\$15/class.</b>	Tricks & Turns Class <b>Thursdays 6-6:30pm</b> Sept 13, 20, 27, Oct 4, 11, 18 6 classes <b>\$60</b>  Must be passed Basic 3 or Adult Basic 2 to enroll.  Walk on fee is <b>\$15/class.</b>	Skating School – Missoula EDGE performance team <b>Sundays 4-5pm Sept 9-Dec 9, 2018</b> 14 Classes & Holiday show performance fee. Show is Sun, Dec 16 <sup>th</sup> . <b>\$290</b> Must be passed Basic 3 or Adult Basic 2 to enroll.  Walk on fee is <b>\$25/class.</b>	Club Ice <u>Fall Session only</u> <b>Aug 28-Nov 30</b> <b>Punch Options</b> 1 punch = 1 hour of skating 5 punch = \$65 \$13/hour 10 punch = \$120 \$12/hour 20 punch = \$215 \$10.75/hour 30 punch = \$292.50 \$9.75/hour Unlimited = \$325 \$7-8/hour <b>Walk-on Fee \$15/hour</b> <b>Punches Expire 11/30/18</b> Approx. <u>55 hours</u> of Club Ice is available in Fall Session	<b>TOTAL</b> 10% discount for additional family members.  Where a family purchases 2 Club Ice packages of different value, the 10% off will be given for the package of lesser value.
#1					
#2					
#3					
#4					
<b>Grand Total Due (add amounts down) Punches are good for <u>Fall Session</u> ONLY</b>					

(√) \_\_\_\_\_ My total is \$250 or more and I want to use the MFSC payment plan (see separate form).  
Mail form to: **MFSC • PO Box 9195 • Missoula MT 59807**

<b>For Office Use Only:</b>			
Date: _____	Amt. Paid: _____	Cash or Ck # _____	Staff Initials _____
Date: _____	Amt. Paid: _____	Cash or Ck # _____	Staff Initials _____
Date: _____	Amt. Paid: _____	Cash or Ck # _____	Staff Initials _____
Payment Plan Form completed* _____ *Option for Club Members only for totals of \$250 or more			
NOTE: Credit Card payments available upon request. Call Dorrie at (406) 370-8401			