



Return to:  
Talbot County  
Community Center  
10028 Ocean Gateway  
Easton, MD  
410-770-8050

# ICE SKATING LESSONS

## 2016-17 Saturday (Check Class & Session)

**Tots (3 Years-5 Years)**

Fee: \$75 9:30AM –10:00AM

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4

**Intro (6 Years-Adult)**

Fee: \$75 10:00AM –10:30AM

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4

**Pre Alpha 1 (6 Years-Adult)**

Fee: \$75 10:30AM –11:00AM

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4

**Pre Alpha 2 (6 Years-Adult)**

Fee: \$75 10:30AM –11:00AM

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4

**Alpha (6 Years-Adult)**

Fee: \$75 11:30AM –Noon

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4

**Beta (6 Years-Adult)**

Fee: \$75 11:30AM –Noon

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4

**Gamma (6 Years-Adult)**

Fee: \$75 11:30 –Noon

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4

**Delta (6 Years-Adult)**

Fee: \$75 11:30 –Noon

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4

**Freestyle (6 Years-Adult)**

Fee: \$75 Noon –12:30PM

- Session 1** October 1 - November 5
- Session 2** November 19– January 14
- Session 3** January 28 - March 4



**Deadlines to Register:**

- \* **Mini-Session– Sept. 3rd**
- \* **Session 1– Sept. 23rd**
- \* **Session 2– Nov. 11th**
- \* **Session 3– Jan. 20th**



Name of Child \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Email \_\_\_\_\_

I am the parent / legal guardian of the above named minor. I hereby waive, release, and forever discharge all claims against the Talbot County Parks and Recreation, its employees, volunteers, commissioners or agents for damages and / or injuries which may arise from participation in the above named activity. I hereby authorize any duly licensed physician, emergency medical technician or medical facility to treat the above named minor for injuries that may be received while participating in the above named activity.

Signature of Parent / Guardian \_\_\_\_\_

Date \_\_\_\_\_

For Office Use: Total Paid \_\_\_\_\_ Cash/Check/Charge \_\_\_\_\_ Date \_\_\_\_\_ Staff Initials \_\_\_\_\_