**Skating School at Iceland**

**Learn To Skate Program**

 (All classes based on enrollment)

**Programs will be held the following six**

Monday 4:00-5:00 PM 9/11, 9/18, 9/25, 10/2, 10/16, 10/23 (6 weeks)

Friday 4:00-5:00 PM 9/8, 9/15, 9/29, 10/6, 10/13, 10/20 (6 weeks)

**Saturdays 10:50-11:50 AM 9/9, 9/16, 9/30, 10/7, 10/14, 10/21 (6 weeks)**

**Sundays 10:00-11:00 AM 9/10, 9/17, 10/1, 10/8, 10/15, 10/22 (6 weeks)**

![C:\Users\skating school\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\XXD57CEK\MC900320470[1].wmf]()![C:\Users\skating school\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\XXD57CEK\MC900282000[1].wmf]() **$160.00 for the 6 week semester**

 **Half hour skating class (with instructor) half hour practice (on own)**

 ***Please note: Some skaters have their practice first, while others have their instruction first,***

 ***This is based on age, level & teacher availability***

 Skate rentalwill be $5 per time or you can buy a discount

 card for the 6 weeks for $24.00 ($4 per skate)

**There will be a $16 registration fee added for the**

**Calendar year sept 2017-june 2018 for USFS LTS Registration**

**Make-ups allowed only with a doctor’s note**

**Registration must be done at least 2 days prior to start date of classes**

 \*\*For more information Please call (516) 746-1100 (ext. 6)

 Visit our website at [www.icelandlongisland.com\*\*\*](http://www.icelandlongisland.com***)

**Bicycle helmet, gloves or mittens and warm clothing are recommended for attending group lessons**

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_city \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_zip\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred day\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender M F

Level of skater\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_