



January 7th – February 25th

2010-2011 7 Week Winter Session

\$133.00

No Lesson Friday February 18th

CLASS DESCRIPTION:

This class is designed for all skill levels to learn new and exciting elements in a fun positive environment.

1/7 Stroking Exercises

1/28 Spiral, Bauer, Spread Eagle

1/14 Jump Technique

2/4 Turns and Edges

2/25 Spin Technique

1/21 Spin Technique

2/11 Jump Technique

CLASS TIMES:

Fridays-5:30-6:00pm (Class style TBD, Based on enrollment) (Freestyle session 5-6:20pm)

Additional practice ice sessions (NO LESSON) available during club ice times. Drop-in Cost: \$16.00 per session.

FINER EDGE

SKATER'S NAME: _____

D.O.B.: _____ AGE: _____ PREVIOUS CLASS EXPERIENCE/LEVEL ASSED: _____

ADDRESS: _____

CITY: _____ ZIP: _____

HOME PHONE NUMBER: _____ CELL PHONE NUMBER: _____

E-MAIL: _____ PARENTS' NAME: _____

BFSC Membership paid: YES NO

Payment type: cash _____ check _____ # _____ credit card please add the \$5.00 processing fee _____

Total Due \$ _____ Visa _____ MasterCard _____ AMEX _____ DC _____

Exp. Date ____/____/____ Credit Card # _____ CSV # _____

Name on Card: _____

Signature: _____

Upon entering events sponsored by Bozeman Figure Skating Club (BFSC), I/We understand and appreciate that participation in, or observation of, the sports of ice hockey and figure skating constitutes risk to me/us of serious injury, including paralysis or death. I/we voluntarily and knowing accept and assume this risk, and release BFSC and LTS, their league affiliates, officers, sponsors, event organizers, skating facilities, coaches and officials from any liability and hold harmless therefore. I /We hereby give my consent for an officer or coach of BFSC of LTS to obtain emergency medical treatment for my child in the event that I am not available.

Parent/Guardian Signature: _____ Date: _____