



HOW TO REGISTER:

- Register ONLINE (by Credit Card) www.icedreams.ca
- Forms & Payment may be dropped off at the Ice Dreams Office at Everest Ice (ice rink entrance).
- By Phone or In Person (by appointment only).
- Mail completed registration form along with payment to the Head Office:
Ice Dreams Skating Academy • 130 RACCO PARKWAY • THORNHILL, ON L4J 8X9
All receipts and confirmation will be emailed.
Telephone: (905) 709-3511 Toll Free: 1-(877)-709-3511 E-mail: info@icedreams.ca

CAMPER INFORMATION

First Name: _____		Last Name: _____	
Date of Birth: _____ (mm/dd/yyyy)	Age: _____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Level/Ability:		<input type="checkbox"/> Previous Lessons at Another Skating Program Level Passed at Previous School: _____	
<input type="checkbox"/> Returning Ice Dreams Camper	<input type="checkbox"/> New to Hockey	<input type="checkbox"/> "A"	
<input type="checkbox"/> No Skating Experience	<input type="checkbox"/> House League	<input type="checkbox"/> "AA"	
<input type="checkbox"/> Some Leisure Skating Experience	<input type="checkbox"/> Select	<input type="checkbox"/> "AAA"	

PARENT INFORMATION

First Name: _____		Last Name: _____	
Address: _____		City: _____	Postal Code: _____
Home Phone: _____	Work Phone: _____	Cell Phone: _____	Email: _____

CAMP INFORMATION

Specify Camp: Winter Break Camp March Break Camp Summer Camp Passover Camp PA Day Camp

Full Day Camp **Daily Full Day Camp** (Indicate Camp Day(s) you are enrolling for): Wed. Thurs. Fri.

Half Day Camp **Daily Half Day Camp** ^{AM} ^{PM} (Indicate Camp Day(s) you are enrolling for): Wed. Thurs. Fri.

On Ice Lesson Only Option (indicate On Ice lesson time): _____
 This option is for those who would rather just take the On Ice lessons during the camp hours, but not participate in the entire camp day.
 This option is available for all ages and levels.

Please indicate the CAMP WEEK(s) you are enrolling for: _____

Please select the On Ice Program you would like your child to participate in during the Camp:

<input type="checkbox"/> Pre-School Learn to Skate (Ages: 2.5 - 6)	<input type="checkbox"/> Beginner Hockey Fundamentals	<input type="checkbox"/> Elite Hockey Academy	<input type="checkbox"/> Pre-Competitive FLOW Figure Skating
<input type="checkbox"/> Parent & Tot Learn To Skate (Ages: 2 - 5)	<input type="checkbox"/> Hockey Foundations	<input type="checkbox"/> Introduction to Power Skating	<input type="checkbox"/> Competitive FLOW Figure Skating
<input type="checkbox"/> Child Learn to Skate (Ages: 4 - 9)	<input type="checkbox"/> Hockey Skills & Drills	<input type="checkbox"/> Peak Performance Power Skating	<input type="checkbox"/> Adult Learn to Skate
<input type="checkbox"/> Youth Learn to Skate (Ages: 10 - 18)	<input type="checkbox"/> Hockey Development	<input type="checkbox"/> High Intensity Power Skating & Agility	<input type="checkbox"/> Adult Hockey Skills
<input type="checkbox"/> Parent & Tot Hockey Lessons (Ages: 3 - 5)	<input type="checkbox"/> High Performance Hockey Academy	<input type="checkbox"/> Introduction to FLOW Figure Skating	<input type="checkbox"/> Adult Power Skating

Additional Information:

Before Camp Care (8:00am drop off) **\$15.00/day** Wed. Thurs. Fri.

After Camp Care (5:30pm pick up) **\$15.00/day** Wed. Thurs. Fri.

Before and After Camp Care (8:00am drop off & 5:30pm pick up) **\$25.00/day** Wed. Thurs. Fri.

TUITION REFUND OPTION \$20.00 This option allows for proportional refund of camp fee for days missed during camp, as a result of illness or injury.

PRICE PROTECTION FEE \$20.00 This option allows for proportional refund of camp fee if camp prices drop or a new promotion is offered after you registered. This time period is within 20 days from the day you registered.

SKATES AND HELMET RENTAL

SKATE RENTAL	HELMET RENTAL
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
# of Classes Equipment Needed: _____ # of Classes Equipment Needed: _____	

PRIVATE & SEMI-PRIVATE LESSON TICKET OPTION

Private Lesson Fee: \$21 / 15 minutes Semi-Private Lesson Fee: \$15.50 / 15 minutes **Number of Tickets:** _____

Program Fee: \$ _____ Discount Entitlement: -\$ _____ Before/After Camp Care Total: \$ _____ Private Lesson Ticket Total: \$ _____ Tuition Refund & Price Protection Option Total: \$ _____ Skate & Helmet Rental Option: \$ _____ HST: \$ _____ Total: \$ _____ Please make cheques payable to: Ice Dreams Skating Academy (post-dated cheques not accepted)	Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Interac Credit Card Number: _____ Expiry Date: _____ (mm/yyyy) Name on Card: _____ Security Code: _____ WAIVER: By signing below, the applicant has read and understands Ice Dreams Skating Academy's Policies. The applicant agrees that Ice Dreams Skating Academy Inc., 1856380 Ontario Inc., or its proprietors will not be held responsible for any accidents or loss however caused and agree to release Ice Dreams Skating Academy Inc., 1856380 Ontario Inc., and its proprietors from all claims and damages which may arise as a result of or by reasons of such accidents or loss. Ice Dreams Skating Academy Inc. & 1856380 Ontario Inc., may publish photos/videos of skaters for promotional and/or internet purposes. NO REFUNDS ONCE CAMPS HAVE STARTED. Parent or Guardian Signature _____ Date _____
---	--