

Skater Name: _____

**Columbus Figure Skating Club
Autumn 2010 Ice**

August 22, 2010 to December 20, 2010

Contracts must be received by August 18th. Deadline for discount is August 11th.

Day	Time	Mins	Session	# Weeks	Session Price	Session Purchased
Sun. am	7:00am to 7:30am	30	General	16	88.00	
Sun. am	7:30am to 8:00am	30	General	16	88.00	
Sun. am	8:00am to 8:30am	30	General	16	88.00	
Sun. am	8:30am to 9:00am	30	General	16	88.00	
Sun. am	9:00am to 9:30am	30	General	16	88.00	
Sun. am	9:45am to 10:15am	30	General	15	82.50	
Sun. am	10:15am to 10:45am	30	General	15	82.50	
Sun. am	10:45am to 11:15am	30	General	15	82.50	
Sun. am	11:15am to 11:45am	30	General	15	82.50	
Mon. pm	6:00pm to 6:30pm	30	Dance	17	93.50	
Mon. pm	6:30pm to 7:00pm	30	Dance	17	93.50	
Mon. pm	7:00pm to 7:45pm	45	Dance	17	140.25	
Wed. pm	6:00pm to 6:30pm	30	General	17	93.50	
Wed. pm	6:30pm to 7:00pm	30	General	17	93.50	
Wed. pm	7:00pm to 7:45pm	45	General	17	140.25	
					TOTAL	

Note: There is no ice on the Sunday & Monday of Labor Day Weekend (9/5-9/6/10) and the Sunday of Thanksgiving Weekend (11/28/10).

Total contract amount from above	_____
Less: Early payment discount (see below)	_____
Less: Ice monitor discount (provided by ice chair)	_____
Total due	_____
Less: Payment with contract (minimum 1/3 rd)	_____
Balance due (due 9/30/10 and 11/30/10)	_____

Discount for contracts received by 8/11/10 (choose only one discount):

_____ contracts over \$500, 10% off total contract

_____ contracts under \$500, 10% off first payment

_____ OSU full-time students, 25% off first payment (enclose proof of AU10 enrollment)

Ice is reserved on a "first come, first served" basis with a maximum of 25 skaters per session.

LOW-LEVEL FREESTYLE SESSIONS FOR CFSC GROUP LESSON STUDENTS AND CLUB MEMBERS

There will be a 30 minute freestyle session immediately preceding the CFSC group lessons from 12:00 – 12:30pm on selected Sundays. This session will be a low-level freestyle session open to CFSC group lesson students and CFSC club members. This is an opportunity for group lesson students (and regular club members) to practice in a low-level, monitored freestyle environment. There is no minimum skill level for this session (in contrast to all other club sessions for which a skater must have passed Basic Skills level 6 or above for in order to practice independently). Skaters may skate on this session on a walk-on basis paying either cash, check or punchcard (no contracts for this session).

PARKING

The parking lot surrounding the OSU ice rink is 24/7 pay visitor parking if you do not have the appropriate OSU parking hangtag. You may purchase a quarterly parking permit at OSU Transportation and Parking (see <http://tp.osu.edu/visitorsmain/parking/permitprices.shtml> for more information) or pay hourly (\$1/hour) using the kiosk machines. The kiosk machines accept coins and credit cards (not bills).

MONITORS ARE NEEDED!!!

Ice monitors receive **CREDITS** toward their next ice contract. Ice monitors make sessions safe for our skaters and keep the ice costs down. They are needed on all sessions. Responsibilities include taking attendance, taking payment, playing music, and enforcing the club's safety rules and policies. Monitors receive a \$5.50 credit for each hour worked. Please indicate which sessions you would like to monitor on the ice application.

Parents, this is a great opportunity to help keep ice costs down for your skater!!! Please consider monitoring - especially if you will be sitting in the stands while your skater is on the ice.

Need a little extra time? Skaters who contract for a session have the opportunity to add on to that session in 15-minute increments. This is available on a stand-by basis only at the walk-on rate of \$7 for 30 minutes or \$3.50 for 15 minutes. Check with the ice monitor for space availability and payment.

Unable to commit? Walk-on/stand-by ice can be purchased at a rate of \$7 for 30 minutes. Check in with the monitor for space availability and payment **prior** to taking the ice.

Punch cards: CFSC punch cards are offered as a convenience for frequent walk-ons. The cost is \$65 for 5 hours of ice (\$6.50 for 30 minutes).

A \$25 late fee is charged for payments received more than 10 days after the due date. Returned checks are subject to a \$15 fee. Failure to uphold your financial obligation will affect skater's eligibility to test and compete. Sessions with low registration may be cancelled. Please retain a copy of the completed application for your records.

Make checks payable to: Columbus Figure Skating Club

Because the OSU ice rink is closed for maintenance, please mail contracts to:

CFSC
c/o Michelle Mader
84 Fallis Road
Columbus, OH 43214

Email address for questions: cfscice@gmail.com

**COLUMBUS FIGURE SKATING CLUB
AU10 ICE APPLICATION**

SKATER _____ AGE _____ DATE OF BIRTH _____

ADDRESS _____ USFSA# _____

PARENTS/SPOUSE _____

HOME PHONE #: _____ WORK PHONE#: _____

E MAIL ADDRESS _____

2010-2011 CFSC MEMBER? ____ YES ____ NO (must be CFSC member to skate on club ice)

OSU STUDENT FOR AU10 QUARTER? ____ YES ____ NO

PRO(S) _____

HIGHEST USFSA TEST PASSED:

FREE: _____

MOVES: _____

FIGURES: _____

DANCE: _____

ADDITIONAL INDIVIDUAL DANCES: _____

FOR BEGINNER SKATERS ONLY:

USFSA BASIC SKILLS LEVEL _____

Skater must have passed level 6 in order to skate independently on club ice sessions.

Skaters lower than level 6 may be on club ice for a lesson ONLY and under the direct supervision of a coaching pro – NO independent practice.

USFSA FREESKATE LEVEL _____

I have read and will comply with the Columbus Figure Skating Club rules governing these ice sessions.

SKATERS SIGNATURE: _____

I agree to pay in full the ice contracted in this application. I understand that ice fees are nonrefundable under normal circumstances once the quarter begins. This fee application is subject to all terms and conditions stated in the membership booklet.

DATE: _____ SIGNATURE: _____

WE NEED MONITORS!!! ICE MONITOR APPLICATION:

NAME _____ PHONE # _____

MONITOR EXPERIENCE (circle) CFSC monitor Non CFSC monitor New monitor

SKATER TO RECEIVE CREDIT _____

Sessions you would like to monitor (Please indicate any dates you would be unable to monitor.)

Choice #1. _____ #2 _____

Choice #3. _____

Session(s) you could be a substitute monitor:
