

WARWICK FIGURE SKATERS

Above Basics Application

Pre-Spring 2008

3/31, 4/1 & 4/7-5/11/08

WFS Use Only

Check # _____

Amount _____

Date _____

West Warwick Civic Center Rink, Factory St., West Warwick, RI

Skater Name _____ Home Phone _____
 Address _____ Cell Phone _____
 City, State, Zip _____ Work Phone _____
 E-Mail Address _____ @ _____ D.O.B. _____ Age _____
 Parent Names _____ Sex: M ___ F ___ USFS # _____
 Last USFS Tests Passed: Freestyle _____ Moves _____
 (Date, Level, Test Location) Dance _____
 Coaches' Names: Freestyle _____ Moves _____
 Dance _____

Open Combined Ice Sessions

Pre-Spring ice sessions are "Open Combined" ice. Skaters working on Moves and Freestyle **must have passed** Freeskate Badge 4 (except for Basic Badge 5+ sessions). Skaters working on Dance **must have passed** Basic Dance Badge 6. All skaters **must be USFS members**. Test levels will be verified.

BADGE 5+ SESSIONS ARE MARKED WITH AN ASTERISK (*)

Monday	(50 min.)	7:00 – 7:50 p.m.	_____ 3/31, 4/7, 14, 21, 28 & 5/5	(6 weeks)	\$67.00	(Buy-on \$16)
Monday	(50 min.)	8:00 – 8:50 p.m.	_____ 3/31, 4/7, 14, 21, 28 & 5/5	(6 weeks)	\$67.00	(Buy-on \$16)
Tuesday	(50 min.)	7:00 – 7:50 p.m.	_____ 4/1, 8, 15, 22, 29 & 5/6	(6 weeks)	\$67.00	(Buy-on \$16)
Tuesday	(50 min.)	8:00 – 8:50 p.m.	_____ 4/1, 8, 15, 22, 29 & 5/6	(6 weeks)	\$67.00	(Buy-on \$16)
*Saturday (5+)	(50 min.)	9:00 – 9:50 a.m.	_____ 4/12, 19, 26, 5/3, 10	(5 weeks)	\$56.00	(Buy-on \$16)
Saturday	(50 min.)	10:00 – 10:50 a.m.	_____ 4/12, 19, 26, 5/3, 10	(5 weeks)	\$56.00	(Buy-on \$16)
Saturday	(50 min.)	11:00 – 11:50 a.m.	_____ 4/12, 19, 26, 5/3, 10	(5 weeks)	\$56.00	(Buy-on \$16)
Sunday (5+)	(50 min.)	9:00 – 9:50 a.m.	_____ 4/13, 20, 27, 5/4, 11	(5 weeks)	\$56.00	(Buy-on \$16)
Sunday	(50 min.)	10:00 – 10:50 a.m.	_____ 4/13, 20, 27, 5/4, 11	(5 weeks)	\$56.00	(Buy-on \$16)
Sunday	(50 min.)	11:00 – 11:50 a.m.	_____ 4/13, 20, 27, 5/4, 11	(5 weeks)	\$56.00	(Buy-on \$16)

TOTAL DUE \$ _____

Please Note: As there are no Music/Monitor fees for the Pre-Spring session, we need volunteers to take attendance and accept buy-on payments for each Session offered. Please fill in which session(s) you are willing to take Attendance on and collect buy-on fees for (ex., Sat., 9-9:50 a.m.) below. You will be responsible for the full session (5 or 6 weeks). These will be Assigned on a first-come, first-serve basis. Anyone who does volunteer for A session will receive two (2) buy-on vouchers good for one year.

Session(s) available to volunteer: _____

Your WFS membership includes medical coverage while skating USFS sanctioned sessions. The signature on the application acknowledges that each skater is physically able to enter a program; that risk of injury exists, but such risk is hereby accepted. The undersigned accepts that there will be no refunds if ice is not available through no fault of WFS. **ALL OUTSTANDING BALANCES MUST BE PAID IN FULL PRIOR TO START OF THIS SESSION.**

Signature _____ Date _____
 (Parent or Guardian, if under 18 years of age)

Payment **in full** is due by March 25, 2008.

Make checks payable to:
Please mail checks to:

Warwick Figure Skaters or W.F.S.
 Warwick Figure Skaters
 C/O Kathy Armstrong
 95 Dawn Marie Court
 North Kingstown, RI 02852

Questions? Contact Kathy Armstrong at katarmstrong@cox.net