

# Learn to Skate

## Youth & Family Programs

### Fall 2009 Session 1 Registration Form

Participant's Name: \_\_\_\_\_ Date of Birth/Age: \_\_\_\_\_

Parent / Guardian Name(s): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

*The College at Brockport F/S/S:* \_\_\_\_\_

\*E-Mail Address: \_\_\_\_\_

\*Will only be used to provide an e-mail confirmation and program information.

- Check the class you would like to register for:

Fall Semester/Session 1		
	Session	Day / Time
	LTS-1Y	September 27, October 4, 11, 25 (2:00-3:00PM)
ADULT CLASS		
	Session	Day / Time
	LTS-1A	September 27, October 4, 11, 25 (2:00-3:00PM)

- Check the approximate level of the participant:

\_\_\_ Beginner      \_\_\_ Intermediate      \_\_\_ Advanced

- Registration Fee:

\_\_\_ \$40 per child      \_\_\_ \$40 per adult      \_\_\_ \$10 skate rental

- Payment Information (choose one):

\_\_\_ Please charge the Visa, MasterCard or Discover card listed below for \$\_\_\_\_\_.

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

\_\_\_ A check payable to Recreational Services is included with this form.

**If paying by credit card, you may mail this form to the address listed below or fax this form to (585) 395-2884.**

**If paying by check, you may mail this form to the address listed below.**

#### Mailing Address

The College at Brockport – Recreational Services  
Attention: JoLynne Corsi-Miller  
350 New Campus Drive  
Brockport, NY 14420