



The Ice Palace Skating Academy

Bus Address: 1502 Marlborough Rd
Fayetteville, NC 28304
(910)677-0073

"LEARN TO SKATE" CLASS REGISTRATION

STUDENTS NAME _____ AGE _____ BIRTHDATE _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
WORK PHONE _____ HOME PHONE _____
PARENTS NAME _____
EMAIL: _____
ISI No. _____ USFSA No. _____

ICE-SKATING EXPERIENCE:

1. NEVER SKATED _____
2. PUBLIC SESSION SKATER _____
3. LEARN TO SKATE LESSONS _____ If yes LEVEL PASSED _____

HOW DID YOU HEAR ABOUT US? Friend ___ Local newspaper ___
Current/Former Student ___ School Flyer ___ Parks and Rec. ___ Website ___
Other _____

CLASS DAY & TIME : _____ / _____

Please make checks payable to **TIPSA**.

Please return the registration form with payment to our office or mail to:

Bus. Address: 1502 Marlborough Rd, Fayetteville, NC 28304

Please mail immediately to assure class choice.

THERE WILL BE NO MAKE-UP CLASSES OR REFUNDS FOR MISSING THE TIME OF YOUR CLASS.

NO REFUNDS WILL BE MADE EXCEPT IN CASE OF INCAPACITATING INJURY OR MILITARY TRANSFER.

I HAVE READ AND SIGNED THE ICE PALACE SKATING ACADEMY'S RELEASE" AND "MEDICAL RELEASE" FORMS AND HAVE ENCLOSED HEREWITH.

DATE

SIGNATURE

OFFICE USE ONLY:

Date Paid _____ Amount \$ _____ Cash _____ Check # _____ Credit _____ Initial _____

Class Assigned: _____ Day : _____ Time: _____ Class Level: _____ Pass Card No: _____