

**Lower Cape Figure Skating Association
P.O. Box 1197
East Orleans, MA 02643**

**BLOCK TWO - ICE CONTRACT
October 30 – December 20 (8 Weeks) 2007**

Skater's Name: _____ Pro's Name _____

STEP #1 – Please check the session(s) you wish to skate:

Tuesday	Wednesday	Thursday
_____ 2:45 – 3:45	_____ 2:45 – 3:45	_____ 2:45 – 3:45
_____ 4:00 – 5:00	_____ 4:00 – 5:00	_____ 4:00 – 5:00
	_____ 5:00 – 6:00	

STEP #2 – Calculate contract amount: **NO ICE ON THURSDAY NOVEMBER 22nd**

Total Sessions per Week skating	Number of weeks this block	Total sessions skating	***Rate per session (below)	Total contract amount DUE
#	X 8	= Less Thurs 11/22	\$	=

*** 1 to 3 sessions per week = **\$15.00 per session**
 *** 4 to 8 sessions per week = **\$13.00 per session**
 Walk-On Coupon Books = 5 per book @ \$15.00 each (5x15=\$75.00)
 Straight Walk-On = \$17.00 per session

STEP #3 – Sign form and enclose cash or check payable to LCFSA.
Drop in the mail or at the rink.

- Notes:**
1. Payment & Contract is due in full by FIRST skating session.
 2. Coupons cannot be used toward this Contract.
 3. No credits can be given for absences or vacations.
 4. Any questions please call Wendy Rich 508 896-4929 or wendyrich75@comcast.net

Parent/Guardian Signature _____ Date: _____

 Date: _____ Paid Cash or Check # _____ Amount \$ _____ Balance _____