



2015 - 2016 Contract Ice
September 1, 2017 to June 15, 2018

USFS#: _____

First Name: _____ M.I.: _____ Last Name: _____ Birthdate: _____

Address: _____ City: _____ State: _____

Zip: _____ Email: _____

Home Phone No. _____ Cell No. _____

Parent Name (s): _____

Home Club: _____ Second Club: _____

Coach (es): _____

Contract Ice \$12/session OR \$10/session if contract is PAID IN FULL (Please select your skate times below)

Day of Week	Contract		# of Weeks	Amount		Time (Must contract minimum of 1 consecutive hr)	No Contract Ice on: (already deducted from # of Weeks)
	Starts	Ends		Paid in Full	Monthly		
Monday	9/11/2017	6/11/2018	37 Weeks	\$370	\$444	<input type="checkbox"/> 3:40 pm - 4:30 pm <input type="checkbox"/> 4:00 pm - 5:00 pm <input type="checkbox"/> 4:30 pm - 5:30 pm <input type="checkbox"/> 5:00 pm - 6:00 pm	11/13/2017 12/25/2017 1/1/2018
Wednesday	9/6/2017	6/13/2018	41 Weeks	\$410	\$492	<input type="checkbox"/> 4:30 pm - 5:30 pm <input type="checkbox"/> 5:00 pm - 6:00 pm	
Friday	9/1/2017	6/15/2018	34 Weeks	\$340	\$408	<input type="checkbox"/> 4:30 pm - 5:30 pm <input type="checkbox"/> 5:00 pm - 6:00 pm	10/20/2017 11/10/2017 2/16/2018 4/13/2018 4/21/2018 4/28/2018 5/4/2018 5/12/2018
Saturday	9/2/2017	5/26/2018	31 Weeks	\$310	\$372	<input type="checkbox"/> 10:40 am - 11:30 am <input type="checkbox"/> 11:00 am - 12:00 pm <input type="checkbox"/> 11:30 am - 12:30 pm	10/21/2017 11/11/2017 2/17/2018 4/14/2018 4/22/2018 4/29/2018 5/5/2018 5/13/2018

Start times may be delayed 10 minutes due to ice resurfacing

You must be a member of "ICES" to contract ice. Once you choose a schedule, you can either pay the total amount due at the beginning of the year or opt for a payment plan of 8 monthly payments with an initial payment equal to 20% of your total contract. All payments are due on the **first of the month**. Checks payable to "ICES". **No refunds**. In addition there will be a \$25 late fee for all late payments and a \$30 fee for all NSF checks. Credit Cards not accepted.

I am responsible for full payment of the ice that I contract.

Signature of Skater or Parent/Legal Guardian if Minor: _____ Date: _____

Total Amount = \$ _____

20% of total amount = \$ _____ (due at Registration)

Remaining amount divided by 8 to make eight equal monthly payments = \$ _____ (October 1, 2017 - May 1, 2018)