

SMALL GROUP HOCKEY SKILLS RESERVATION FORM 9/10-11/19

SESSION 1 CIRCLE WEEKS:

WEEK 9/10	WEEK 10/1	WEEK 10/ 22	WEEK 11/12
W EEK 9/17	WEEK 10/8	WEEK 10/29	WEEK 11/19
WEEK 9/24	WEEK 10/16	WEEK 11/5	
ALL SESSIONS		D VIA EMAIL. AL	IORITY BOOKING LL SESSIONS ARE \$25 DUP IS REQUIRED AT
TIME OF CONFIR	RMATION. PAYMEN	T IS ACCEPTED TH	ROUGH VENMO.
	NAME:		
SKATERS:			

ALL FORMS MUST BE SENT TO: customerservice@centerskatingacamedy.com
SKATERS MUST FILL OUT SMALL GROUP REGISTRATION FORM ON "FORMS"
TAB. ONCE ALL HAVE REGISTERED, GROUP WILL BE CONFIRMED.

ALL SKATERS MUST FILL OUT SMALL GROUP HOCKEY SKATER RESERVA-TION FORM, SKATER REGISTRATION FORM, CODE OF CONDUCT FORM, AND COVID-19 WAIVER AT TIME OF REGISTRATION IF YOU HAVE NOT DONE SO ALREADY.