



CPA BROSSARD REGISTRATION 2010-2011

(AUGUST 31, 2010 - MARCH 13, 2011)

REGISTRATION FORM: PRIVATE SKATERS

REGISTRATION: AUGUST 11 & 18, 2010 at CS BELL from 7:00 pm - 9:00 pm

PRIVATE: LAST TEST COMPLETED →	SKILLS	DANCE	FREE STYLE
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LAST NAME					FIRST NAME					
ADDRESS					POSTAL CODE					
FEMALE	MALE	DATE OF BIRTH:			DAY	MONTH	YEAR			
HOME TELEPHONE () -					CELL TELEPHONE () -					
MEDICARE NUMBER										EXP. (YYYY/MM)
SERVICARD NUMBER		Q	B	D	0	0	4			EXP. (YYYY/MM/DD)
MOTHER'S NAME		WORK TELEPHONE				e-mail				
FATHER'S NAME		WORK TELEPHONE				e-mail				
SKATE CANADA CARD NUMBER										

ALL BROSSARD RESIDENTS MUST PROVIDE THE FOLLOWING AT REGISTRATION:

- a) A completed registration form
- b) A photocopy of skater's VALID Servicarte
- c) A photocopy of a VALID driver's license (proof of residence)
- d) Two (2) completed medical forms

ALL NON-RESIDENTS OF BROSSARD MUST PROVIDE THE FOLLOWING AT REGISTRATION:

- a) A completed registration form
- b) Name of home club: _____
- c) A photocopy of skater's VALID Access Card
- d) A photocopy of a VALID driver's license (proof of residence)
- e) A photocopy of skater's Skate Canada Card
- f) Two (2) completed medical forms

NOTE: All non-residence are required to pay a base rate of \$60.00 plus double (2X) the ice rate (2 block minimum)

SKATER'S NAME: _____ E-MAIL: _____

PLEASE CHOOSE FROM THE BLOCKS LISTED BELOW BY HIGHLIGHTING BLOCK OF INTEREST WITHIN THE CATEGORIES

JUNIOR ↓ NO FREE STYLE TEST PASSED			INTERMEDIATE ↓ PRELIM. / JUNIOR BRONZE FREE STYLE TEST -- PASSED			SENIOR ↓ SENIOR BRONZE FREE STYLE TEST OR HIGHER -- PASSED		
BLOCK	Day / Arena / Time	\$	BLOCK	Day / Arena / Time	\$	BLOCK	Day / Arena / Time	\$
P.Scol	TUE/@ CS Bell/ 15H30-16H30	FREE	P.Scol	TUE/@CS Bell/ 15H30-16H30	FREE	P.Scol	TUE/@CS Bell/ 15H30-16H30	FREE
P.Scol	THUR/@CS Bell/ 15H30-16H20	FREE	P.Scol	THUR/@CS Bell/ 15H30-16H20	FREE	P.Scol	THUR/@CS Bell/ 15H30-16H20	FREE
P.Scol	FRI/@CSBell/ 15H30-16H20	FREE	P.Scol	FRI/@CSBell/ 15H30-16H20	FREE	P.Scol	FRI/@CSBell/ 15H30-16H20	FREE
1	TUE/@4 Glaces-C 18H15-19H30-open	\$52	1	TUE/@4 Glaces-C/ 18H15-19H30-open	\$52	1	TUE/@4 Glaces-C/ 18H15-19H30-open	\$52
2	TUE/@CS Bell/ 16H30-17H30-open	\$45	2	TUE/@CS Bell/ 16H30-17H30-open	\$45	2	TUE/@CS Bell/ 16H30-17H30-open	\$45
6	THURS/@CS Bell/ 16h20-17h10-open	\$40	3	TUE/@ CS Bell/ 17H40-18H40	\$45	4	TUE/@CS Bell/ 18H40-19H40	\$45
13	SAT/@4 Glaces-B/ 7H15-8H15-open	\$45	4	TUE/@CS Bell/ 18H40-19H40	\$45	5	TUE/@CS Bell/ 19H50-20H50	\$45
19	SAT/@4 Glaces-C/ 9H30-10H40-open	\$50	6	THUR/@CS Bell/ 16h20-17h10-open	\$40	6	THUR/@CS Bell/ 16h20-17h10-open	\$40
20	SAT/@4 Glaces-C/ 10H40-11H50	\$50	7	THUR/@CS Bell/ 17H20-18H20	\$45	7	THUR/@CS Bell/ 17H20-18H20	\$45
22	SAT/@4 Glaces-D/ 12H15-13H30	\$52	13	SAT/@4 Glaces-B/ 7H15-8H15-open	\$45	11	FRI/@CS Bell/ 19H50-20H50	\$45
<p>Junior Ice is available with the purchase of parcels for the following skaters:</p> <p>Badges 4 and up with a coach</p> <p>Star Group with a coach</p>			19	SAT/@4 Glaces-C/ 9H30-10H40-open	\$50	12	FRI/@CS Bell/ 20H50-21H50	\$45
			21	SAT/@4 Glaces-C/ 12H00-12H15	\$52	13	SAT/@4 Glaces- B/ 7H15-8H15-open	\$45
			17	SAT/@4 Glaces-B/ 11H30-12H30	\$45			
			18	SAT/@4 Glaces-B/ 12H30-13H30	\$45			
			19	SAT/@4 Glaces-C/ 9H30-10H40-open	\$50	19	SAT/@4 Glaces-C/ 9H30-10H40-open	\$50

SKATER'S NAME: _____ E-MAIL: _____

Registration Fees

For Junior, Intermediate & Senior Skaters (Private Ice Skaters)

- Base Rate = \$100 + total cost of each block purchased (two block minimum)
"Projet scolaire" is FREE
- Block Z: \$100 + \$85 (equivalent to two blocks) = \$185
(For skaters who do not intend to skate regularly on Brossard ice and are not assigned to any particular blocks). Note: free style level must be respected when choosing a block to skate.

(A)

Base Rate	Block #	Block #	Block #	Block #	Block #	Block #	Block #	Block #	Total Due
\$100 +	\$ +	\$ +	\$ +	\$ +	\$ +	\$ +	\$ +	\$ =	\$

PLUS

(B) **EQUIPE DE PERFECTIONEMENT COURSE (FOR PP BADGE 4 AND UP) = \$150**

Offered on Sunday at 4 Glaces (Ice C) between 7h00-8h05 and 8h15-9h20 (Groups will alternate during the season) - (Must be registered as a full time skater for CPAB in order to be eligible)

TOTAL PAYMENT DUE: \$ _____ (A) + \$ _____ (B) = \$ _____

CASH \$ _____	CHEQUE \$ _____ NAME ON CHEQUE (Please Print): _____	TAX RECEIPT ISSUED IN THE NAME OF: (Please Print) _____
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- ALL CHEQUES MUST BE MADE PAYABLE TO: **CPA BROSSARD**

- NB: If you do not use your reserved blocks for three (3) weeks consecutively, we reserve the right to move you to Block Z.
- NB: "Projet scolaire" are open blocks and free to CPAB skaters only, who are registered as full time members (minimum two blocks): "Patinage Plus étape 4 réussi" with a coach, Group Star with a coach, Junior, Intermediate & Sénior. **For Updates, Changes, and General Information refer to our website: www.cpabrossard.org**



MEDICAL INFORMATION

THIS FORM MUST BE COMPLETED AND SUBMITTED AT REGISTRATION IN DUPLICATE (TWO (2) SEPARATE SHEETS MUST BE SUBMITTED)

*****The information requested on this form is very important*****

*****The security of your child may depend on it*****

NAME OF SKATER: _____

MEDICARE #: _____ Expiry date: _____

CONTACT IN CASE OF EMERGENCY

1. _____ TEL: () _____
2. _____ TEL: () _____
3. _____ TEL: () _____

Illness: _____

Allergies: _____

Needs an Epi-pen: Yes _____ No _____ If yes, please have available during skating lessons.

Medications: _____

Does your child wear a Medic-Alert bracelet? Yes _____ No _____

If yes, give the number and reason: # _____ Reason _____

Other useful information: _____

I, hereby authorize the C.P.A. Brossard to make, in case of emergency, necessary decisions to ensure the safety and security of my child and to obtain any advice or medical service needed from a clinic or hospital, if necessary. I accept any financial responsibilities that are otherwise not covered for by the Régie l'assurance maladie du Québec.

Name of parent or tutor: _____ Signature of parent or tutor: _____

Dated: Day _____ Month _____ Year: _____

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