

**Binghamton Figure Skating Club, Inc.**  
**2009/2010 "Learn-to-Skate" Registration Form**

**Mail/Contact Information**

Parent's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Has student had lessons before? No \_\_\_\_ . Yes \_\_\_\_ : Current level 1\_\_ 2\_\_ 3\_\_ 4\_\_ 5\_\_ 6\_\_ 7\_\_ 8\_\_

**Skater Registrations**

Names of Skaters (all from same household)	Date of Birth (mm/dd/yy) or Adult	Gender (M/F)	Parent Skate*  (per session per person fee)	Broome Community College					
				Saturday (S) Sessions				Tuesday (T) Sessions	
				S-1 9/19 to 10/24	S-2 10/31 to 12/5	S-3 12/12 to 1/23	S-4 1/30 to 3/6	T-1 1/5 to 2/9	T-2 2/16 to 3/23
1.			<input type="checkbox"/> \$18	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60
2.			<input type="checkbox"/> \$18	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60
3.			<input type="checkbox"/> \$18	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60
4.			<input type="checkbox"/> \$18	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60
5.			<input type="checkbox"/> \$18	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60
6.			<input type="checkbox"/> \$18	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60
7.			<input type="checkbox"/> \$18	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60
Method of payment:			<b>Column TOTALS:</b>						
Check # _____, Cash _____ Money order # _____			<b>Grand TOTAL:</b>						

**Mail Registration/Payment to: Binghamton Figure Skating Club, Inc.**  
**P.O. Box 126, Endicott, New York 13761-0126**