



**FALL 2020 Ice Contract
September 14, 2020 – December 23, 2020**

**REGISTRATION DEADLINE:
SEPTEMBER 4, 2020**

All fields must be completed, and all required signatures must be included before application will be processed.

ONLINE PAYMENTS
<https://www.amherstskatingclub.org/online-bill-pay>

Skaters Name: _____ Age: _____

Coach: _____ Freestyle Level: _____ Skates: F (figure) or H (hockey)

<u>Hourly Rates (a) Check one</u>	<u>ASC Club</u>	<u>Non-ASC Club & USFSA Member</u>
1 – 2 hours/week	\$14.50 <input type="checkbox"/>	\$16.00 <input type="checkbox"/>
3 – 5 hours/week *	\$13.75 <input type="checkbox"/>	\$16.00 <input type="checkbox"/>
6 hours or more/week *	\$13.00 <input type="checkbox"/>	\$16.00 <input type="checkbox"/>

*After initial enrollment, additional hours are at a discounted rate

_____ X	_____	\$ _____
Total Hours((b) from page 2)	Hourly Rate ((a) from above)	Total Ice Cost

Past Due or Account Credit +/-	
Fall Registration Fee -	\$25.00
USFS Annual Fee -	
SUB TOTAL =	
Total Paid =	
BALANCE DUE November 1, 2020 =	

**ICE CONTRACT POLICIES:
CONFIRMATION OF PAYMENT,
ICE REGISTRATION & USFS
REGISTRATION MUST BE OBTAINED
PRIOR TO SKATER ATTENDING ANY ICE
SESSIONS**

- Payment Options:**
- If payment total is \$400 or less full payment is required at time of registration.**
 - If payment is greater than \$400 a payment of at least 50% must be made at registration.**
 - The above totals are ice purchase costs only and do not include the cost for registration fee, membership fee etc.**
 - USFS Membership Fees & Fall Registration fees are not included in Payment Plans.**
 - In the event the facility (The Northtown Center) and / or Amherst Skating Club, is unable to operate due to a COVID-19 closure, there will be no refunds given for unused ice time. A determination on whether credits will be generated will be made at a later date.**

- If paying by check, please make payable to Amherst Skating Club.
 - Mail completed forms to Amherst Skating Club, 1615 Amherst Manor Dr. Williamsville NY 14221. Drop form, proof of payment or check into ASC mailbox, bottom floor at Northtown Center.
 - Online payments accepted at <https://www.amherstskatingclub.org/online-bill-pay>
- Sessions may be cancelled due to an insufficient number of skaters.**

I certify that the above information is true and agree to my financial obligation to the Amherst Skating Club as reflected under "total".

I agree to abide by the Rules of the Amherst Skating Club and hold the Amherst Skating Club and its officers harmless from any and all liability for injuries to the skater and from any and all liability for damage to or loss of property.

I give permission for my skater to be in any ice photo that may be used for promotional purposes. YES NO

Parent/Adult Skater: _____ Date: _____

Parent Email Address: _____ Emergency Phone Number: _____

Date:	Amount:	Check #/Stripe/Cash	Rec'd By:
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ASC FALL 2020 Ice Selection
September 14, 2020 – December 23, 2020

Skaters Name: _____

Level: _____ **Coach's Name:** _____

Ice Selection Instructions:

Circle the session number(s) you wish to purchase. Multiply the # of hours by the # of weeks in that row and put that number in the total hour's column, repeat for other sessions. Place your total number of purchased hours (b) on the corresponding line on the back page.

Bring both pages to registration on the date and time listed above.

Payments must accompany ice contracts. Please check policies for payment options.

Ice contracts received after the registration day and time will be processed on a first come first served basis

<u>Session#</u>	<u>Day</u>	<u>Time</u>	<u>Session Level</u>	<u># Weeks</u>	<u>Total Hours</u>
1	Monday	4:30pm - 5:30pm	All levels	15	_____
2	Monday	5:30pm - 6:20pm	All levels	15	_____

Club Ice Dates: 9/14, 9/21, 9/28, 10/5, 10/12, 10/19, 10/26, 11/2, 11/9, 11/16, 11/23, 11/30, 12/7, 12/14 & 12/21

3	Tuesday	4:30pm - 5:30pm	All levels	15	_____
4	Tuesday	5:30pm - 6:20pm	All levels	15	_____

Club Ice Dates: 9/15, 9/22, 9/29, 10/6, 10/13, 10/20, 10/27, 11/3, 11/10, 11/17, 11/24, 12/1, 12/8, 12/15 & 12/22

5	Wednesday	4:30pm - 5:30pm	All levels	15	_____
6	Wednesday	5:30pm - 6:20pm	All levels	15	_____
7	Wednesday	6:30pm - 7:20pm	All levels	15	_____

Club Ice Dates: 9/16, 9/23, 9/30, 10/7, 10/14, 10/21, 10/28, 11/4, 11/11, 11/18, 11/25, 12/2, 12/9, 12/16 & 12/23

8	Thursday	4:30pm - 5:30pm	All levels	13	_____
9	Thursday	5:30pm - 6:20pm	All levels	13	_____

Club Ice Dates: 9/17, 9/24, 10/1, 10/8, 10/15, 10/22, 10/29, 11/5, 11/12, 11/19, 12/3, 12/10 & 12/17

10	Friday	6:00pm – 6:50pm	All levels	13	_____
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Club Ice Dates: 9/18, 9/25, 10/2, 10/9, 10/16, 10/23, 10/30, 11/6, 11/13, 11/20, 12/4, 12/11 & 12/18

11	Saturday	10:00am – 11:00am	All levels	13	_____
12	Saturday	11:00am – 11:50am	All levels	13	_____

Club Ice Dates: 9/19, 9/26, 10/3, 10/10, 10/17, 10/24, 10/31, 11/7, 11/14, 11/21, 11/28, 12/5 & 12/19

Total Hours (b): _____

Walk on Fees: \$20 for all USFS members

No ice scheduled for 11/28, 11/29, 12/24 to 1/1/2021



ASC Volunteer Rewards Program

Dear Members – ASC has a program where families can earn free ice time by volunteering their time to the club.

Parents and Skaters (age 16 years and older) can become Ice Monitors

For every 5 session you volunteer, you will receive a coupon for a free hour of ice to use during any club ice session.

Ice coupons earned during the current season will be distributed at registration the following season.

For example: When you volunteer for 5 sessions during the Summer Session, you will receive a coupon for 1 hour of free ice time to use during the Fall/Winter Session.

Please see the REQUIRED Volunteer Sheet and thank you for helping ASC!





REQUIRED Volunteer Sheet 2020

Parent Name: _____

Skater Name: _____

Phone: _____ Email: _____

Section 2.4 of the ASC bylaws state that all club members are required to volunteer a minimum of 5 hours per year.

Here is how you can do your share!

Check off the area you want to participate in:

- Competitions
 - Registration
 - Convening
 - Music/Announcing
 - Hospitality
- Learn To Skate
 - On-Ice Volunteers – ages 12 years and up only
- Test Sessions
 - Registration
 - Convening
 - Music/Announcing
 - Hospitality
- Baking
- Annual Banquet
- Fundraising
- Other:

Signature: _____ **Date:** _____

**AMHERST SKATING CLUB
EMERGENCY CONTACT FORM
PLEASE PRINT**

Skater's Full Name: _____

Skater's Address: _____

Skater's Phone Number: _____

Mother's Full Name: _____

Mother's Address: _____

Mother's Email Address: _____

Mother's Phone Number: _____

Father's Full Name: _____

Father's Address: _____

Father's Email Address: _____

Father's Phone Number: _____

ADDITIONAL INFO IF NECESSARY:

