



# Nantucket Skating Club

8<sup>th</sup> Annual Nantucket Edge, An Intensive five-day figure skating clinic

July 24 to 28, 2017

## Registration Form

Skater's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone : \_\_\_\_\_ Skater Cell Phone : \_\_\_\_\_

Skater E-mail : \_\_\_\_\_

Skater DOB : \_\_\_\_\_ Skater USFS #: \_\_\_\_\_

Skater's Home Club: \_\_\_\_\_ Coach: \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_ Parent 2 Name: \_\_\_\_\_

Parent 1 Cell: \_\_\_\_\_ Parent 2 Cell: \_\_\_\_\_

Parent 1 E-mail: \_\_\_\_\_ Parent 2 E-mail: \_\_\_\_\_

Highest USFS Test Passed:

Basic Skills \_\_\_\_\_ (Must have passed BS level 4)

Moves in the Field \_\_\_\_\_

Freestyle \_\_\_\_\_

Dance \_\_\_\_\_

*All participants will receive a complimentary T-shirt.*

*Circle one size:*

*Child    M        L*

*Adult    S        M        L        XL*

Please check the box of the level you are signing up for:

- Group A** – Passed FS6 -- \$650 NSC members -- \$800 Non-NSC members  
**For Group A, Skater must have mastered all single jumps and at least working on AXEL**  
*Monday - Thursday: 9:30 – 4:00*  
*Friday: 9:30 – 3:00 (Performance at 2:15)*
- Group B** – Passed BS5 -- \$550 NSC members -- \$675 Non-NSC members  
*Monday – Thursday: 10:30 - 4:00*  
*Friday: 10:30 – 3:00 (Performance at 2:15)*

*NSC 2017-2018 Membership Renewal must be received before Edge Registration to receive member pricing*

- Each group has a limited class size; this is a first-come, first-serve sign-up
- Registration forms must be received by June 24th with \$100 non-refundable deposit
- Registration forms received after June 24<sup>th</sup> will be accepted on a space available basis with a \$50 late processing fee
- Full non-refundable payment must be received by July 7th
- Payments in full received after July 7th will be charged a late processing fee of \$50
- Please make checks payable to Nantucket Skating Club

**Return completed registration form, medical form, private lesson form and payment to:  
Nantucket Skating Club, PO Box 3155, Nantucket, MA 02584 or  
nantucketskatingclub@comcast.net**

Credit Card Number: \_\_\_\_\_ Exp \_\_\_/\_\_\_ CID \_\_\_\_\_ Zip Code \_\_\_\_\_

Payment Received by \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Check # \_\_\_\_\_ Cash \$ \_\_\_\_\_ Credit Card \_\_\_\_\_