

CITY OF PEABODY LEARN TO SKATE

APPLICATION FORM

Date _____ Receipt # _____ Starting Date _____

NAME OF CHILD _____

AGE _____

PARENT/GUARDIAN _____
(First and Last Name)

ADDRESS _____

TELEPHONE _____ E-Mail _____

Tuesdays 4:15 – 5:05pm _____ 10 Weeks

Sundays 11:00-11:50am _____ 10 weeks

REFUNDS – *The Skating rink will hold your total payment for the first two lessons. If you decide to leave the program before the start of the 3rd class, you will only owe for the two lessons @ \$20.00 per class. There is No Refunds after the start of your 3rd class.*

Payment must be made by check or cash. No credit cards

Helmets Required (Bike or Hockey)

Face Coverings/Social Distancing

Warm Clothing should be worn (gloves, mittens, etc)

Sessions cancelled because of holidays or snow days will be made up.

\$10.00 discount for extra sibling sign up.

Each class has a minimum enrollment. If the minimum enrollment is not met, the rink has the right to cancel the class. You will be given the option to transferring your child into another class, or a full refund.

Sorry no parents allowed on the ice. It is the City of Peabody's policy to reasonably accommodate persons with disabilities in their use of our Learn to Skate class. If you need adaptations or accommodations due to a specific disability, please contact Rink Manager so that appropriate measures can be taken.

I have read and understand the terms above.

Parent Signature _____

Date _____