

# LEARN-TO-SKATE

**WINTER 2015: JAN. 5-FEB. 28 (8 weeks)**

Registrations on or after January 4 will incur a \$10 administrative fee

## DUBLIN WINTER 2015

MON	6:00-6:40pm	Parent/Tot \$130	Stinger 1-3 \$115	Advanced Stinger \$115	Basic 1-3 \$115	Adult 1-4 \$115
	6:45-7:25pm	Basic 3-8 \$115	Freeskate 1-6 \$130			
WED	6:00-6:40pm	Parent/Tot \$130	Stinger 1-3 \$115	Basic 1-3 \$115	Hockey Skating 1 \$115	<b>NEW!</b>
	6:45-7:25pm	Basic 4-8 \$115	Freeskate 1-6 \$130	Adult 1-4 \$115		
FRI	10:00-11:00am	Parent/Tot \$100	Stinger 1-3 \$100	Basic 1-8 \$100	Freeskate 1-6 \$100	Adult 1-4 \$100
SAT	9:15-9:55am	Basic 3-8 \$115	Freeskate 1-6 \$130			
	10:00-10:40am	Parent/Tot \$130	Stinger 1-3 \$115	Basic 1-2 \$115	Advanced Stinger \$115	
	10:45-11:25am	Parent/Tot \$130	Stinger 1-3 \$115	Basic 1-2 \$115	Adult 1-4 \$115	

## EASTON WINTER 2015

TUES	10:00-11:00am	Parent/Tot \$100	Stinger 1-3 \$100	Basic 1-8 \$100	Freeskate 1-6 \$100	
	6:00-6:40pm	Parent/Tot \$130	Stinger 1-3 \$115	Basic 1-3 \$115	Hockey Skating 1 \$115	<b>NEW!</b>
	6:45-7:25pm	Basic 1-8 \$115	Freeskate 1-6 \$130			
THUR	6:00-6:40pm	Parent/Tot \$130	Stinger 1-3 \$115	Advanced Stinger \$115	Basic 1-3 \$115	
	6:45-7:25pm	Basic 1-8 \$115	Adult 1-4 \$115			
SAT	9:15-9:55am	Parent/Tot \$130	Stinger 1-3 \$115	Basic 1-3 \$115		
	10:00-10:40am	Basic 1 \$115	Basic 4-8 \$115	Adult 1-4 \$115	Freeskate 1-6 \$130	

## NORTH WINTER 2015

MON	10:00-11:00 am*	Parent/Tot \$87*	Stinger 1-3 \$87*	Basic 1-8 \$87*	Freeskate 1-6 \$87*	
	6:00-6:40pm	Parent/Tot \$130	Stinger 1-3 \$115	Basic 1-3 \$115		
	6:45-7:25pm	Basic 1-8 \$115	Freeskate 1-6 \$130			
WED	6:00-6:40 pm	Parent/Tot \$130	Stinger 1-3 \$115	Advanced Stinger \$115	Basic 1-3 \$115	Freeskate 1-6 \$130
	6:45-7:25 pm	Basic 1-8 \$115	Adult 1-4 \$115	Freeskate 1-6 \$130		
SAT	9:15-9:55am	Parent/Tot \$130	Stinger 1-3 \$115	Basic 1-2 \$115	Adult 1-4 \$115	<b>NEW!</b>
	10:00-10:40 am	Parent/Tot \$130	Stinger 1-3 \$115	Basic 1-3 \$115	Freeskate 1-6 \$130	Hockey Skating 1 \$115
	10:45-11:25 am	Basic 1 \$115	Basic 4-8 \$115	Adult 1-4 \$115	Freeskate 1-6 \$130	

\*No Monday 10:00am classes February 16. Class price reduced to reflect the shortened session.

**PLEASE NOTE: Registrations on or after January 4 will incur a \$10 administrative fee**

# WINTER 2015 LEARN TO SKATE ENROLLMENT

<b>Parent Name:</b>		<b>Payment Method:</b>			
<b>Street:</b>		MC	Visa	Discover	Check    Cash
<b>City:</b>	<b>Zip:</b>	<b>Card #:</b>			
<b>Phone:</b>	<b>Alt #:</b>	<b>Exp Date:</b>	<b>NAME ON CARD:</b>		
<b>Email:</b>		<b>3 Digit Security Code :</b>		<b>Amount:</b>	
<b>Add'l Emergency Contact Name/Phone #:</b>		<b>Auth #:</b>	<b>Disc. Applied (circle one):</b>		
		<b>Check #:</b>	DUB	COUPON	
<b>How did you hear about the Chiller?</b>					
<b>Skater #1 Name:</b>		female / male	<b>Age:</b>	<b>B-date:</b>	
<b>Skater #1 Category/Goal (check one):</b> <input type="checkbox"/> Recreational Skater <input type="checkbox"/> Figure Skater <input type="checkbox"/> Hockey Player <input type="checkbox"/> Speed Skater					
<b>Class Name:</b>		<b>Level:</b>	<b>Day/Time:</b>		
<b>Location (circle one):</b>		Dublin	Easton	North	<b>Amount:</b>
<b>Skater #2 Name:</b>		female / male	<b>Age:</b>	<b>B-date:</b>	
<b>Skater #2 Category/Goal (check one):</b> <input type="checkbox"/> Recreational Skater <input type="checkbox"/> Figure Skater <input type="checkbox"/> Hockey Player <input type="checkbox"/> Speed Skater					
<b>Class Name:</b>		<b>Level:</b>	<b>Day/Time:</b>		
<b>Location:</b>		Dublin	Easton	North	<b>Amount:</b>

**Accident/Liability Release:** I, or my son/daughter or child over whom I have legal custody, wish to participate in Chiller classes/activities organized by Chiller LLC. I agree to release Chiller LLC, COLHOC Limited Partnership, OhioHealth Ice Haus, Nationwide Arena LLC, and/or their members, employees, agents, representatives, sponsors, affiliates and/or subsidiaries, from all claims, actions, causes of action or damages suffered by me or my son/daughter or child over whom I have custody for any loss or injury resulting from participation in the aforesaid classes/activities. I understand that by participating in a Chiller program, I or my child could be injured, die and/or suffer property damage. Regardless of any bodily injury, death or property damage sustained by me or my child from participating in a Chiller program, I agree not to sue, or allow others to sue on my behalf, Chiller LLC, COLHOC Limited Partnership, OhioHealth Ice Haus, Nationwide Arena LLC, and/or their members, employees, agents, representatives, sponsors, affiliates and/or subsidiaries.

I further agree to indemnify and hold harmless Chiller LLC, COLHOC Limited Partnership, OhioHealth Ice Haus, Nationwide Arena LLC, and/or their members, employees, agents, representatives, sponsors, affiliates, and/or subsidiaries, from all claims, actions, causes of action, or damages brought by me or on my child's behalf by any other party stemming from participation in any and all Chiller activities.

**\*\*BY ENROLLING IN THIS CLASS, YOU AGREE TO AND UNDERSTAND THE RIGHTS WAIVED HEREIN. BY AGREEING TO THESE TERMS, YOU MAY GIVE UP LEGAL RIGHTS.\*\***

<b>EMPLOYEE NAME:</b> _____	<b>DATE:</b> _____
<b>ENTERED IN BOOK:</b> _____	<b>ENTERED IN COMPUTER:</b> _____
<b>COMMENTS:</b> _____	
_____	
_____	

**Ready to enroll? Visit <http://theChiller.com/register> today!**  
**Can't enroll this time? Next session: Early Spring 2015: March 9-May 2, 2015.**