



Irish Figure Skating Club's Learn to Skate!



THURSDAY EVENINGS FROM 6:00 PM - 7:00 PM at the ICE BOX

The Irish Figure Skating Club is excited to promote ice skating in the community by providing safe, fun & high quality group instruction in accordance with Learn To Skate USA Guidelines. The Irish Figure Skating Club offers classes year-round at the Ice Box Skating Rink in South Bend, Indiana. Our **Learn to Skate** is a program that is a stepping stone to learning the skills necessary for recreational skating, more advanced figure skating and hockey.

PROGRAMS OFFERED: My Tot & Me, Snow Plow Sam, Basic, Freeskate, Hockey, & Adult

Cost is **\$80.00** for the 6-week session, plus an annual \$25 membership fee (July 1, 2025-June 30, 2026).

Payment is due at the time of class. Some classes require full membership.

If registrations are low, class levels may be combined. **No makeup lessons.**

Any questions can be addressed to LTS Director at mriccio13@iceboxskatingrink.org or call 574-288-3300 ext.100

2025-2026 Season Session: 1 2 3 4 5

Skater Name _____

Level _____ Birth date _____ M/F _____

Address _____ City _____ Zip _____

Parent Name _____

Parent Email: _____ Phone Number: _____

Are there any physical conditions or situations we should be aware of: _____

LIABILITY WAIVER AND EMERGENCY MEDICAL CONSENT

I hereby release the Irish Figure Skating Club and the Ice Box Skating Rink, its affiliates, professional staff, Club Officers, and Board members from any and all liabilities as a result of personal injury, which may be sustained by myself/my child. In the event of injury, I authorize Irish FSC to seek on my/my child's behalf, whatever medical treatment the Club may deem necessary.

Skater/Parent Signature _____ Date _____
(Parent/Guardian if under 18)

Photo Release Statement

I hereby consent to and authorize the use of any photographs that have been taken of me and/or my child(ren) for the purpose of marketing/advertising of the IFSC. Such photographs will not have names listed. I hereby acknowledge that I have read and understood the terms of this release.

Please X: Yes _____ No _____

For IFSC use Only:

	DATE	CHECK/CARD NUMBER/CASH	AMOUNT	Registered with USFS
1				
2				
3				
4				
5				

