

ICE VAULT

Director's Junior Team



The Director's team, offered during freestyle training sessions, is the most cost effective way to help young skaters begin their figure skating training. The Junior Team is for skaters working on **Freeskate 1 and higher** Learn to Skate Skills. This class program is recommended in addition to private lessons with your coach.

Saturday Fall Session September 7th – December 21st, 2019

Skaters will learn:

- Freestyle session training rules
- Warm-Up and Practice Drills
- Continued instruction on the Basic Skills curriculum
- Jump and spin training
- Skating choreography and musical interpretation

We also prepare skaters for their first figure skating tests and competitions!

Includes:

- 30-minute class (minimum 3 skaters, maximum 8 skaters) with a National or International level coach. Coaches are assigned by the Director
- 30 minutes' practice time on freestyle session
- Students are required to purchase 1 freestyle session per week for their class ice time.

Cost: \$324 - 12 weeks, meeting 1 day per week**

Saturdays - 9:15-9:45am training, 9:45-10:15am practice.

*****Price listed is for the class only. Freestyle sessions can be purchased with 20 Pass Card, or pay as you go.***

There are no refunds, cancellations or make-ups.

Please contact Karen Cohen-Prosnitz for more information
karenc@icevault.com 973-628-1500 ext. 123



Director's Junior Team Registration Form

Skater Information

Name _____ Age _____ D.O.B. ___/___/___

Address _____

City/State/Zip _____

E-mail _____@_____

Home Phone (____) _____ Work Phone (____) _____

Cell Phone (____) _____

Emergency contact Name and Phone _____ (____) _____

Highest Skating Level Passed _____

Fall class dates: Saturday – 9/7, 14, 28; 10/5, 19, 26; 11/2, 16, 23; 12/7, 14, 21.

No classes 9/21; 10/12; 11/9, 30.

\$324 – 12-week class program, meeting 1 day per week; freestyle ice is **not** included

Payment method is cash or check only. Credit cards will not be accepted. Payments must be received by Coach Karen or brought to the front office prior to the first class date.

Checks should be made to: Karen Cohen-Prosnitz.

NO REFUNDS OR MAKEUPS

WAIVER RELEASE

It is agreed that the Ice Vault shall in no way be responsible or liable for any injury of any kind arising out of or in the course of an operation of the Ice Vault. It is the intention of the parent to waive and release any and all claims, of any kind whatsoever in law or in equity of his/her son/daughter, or ward, a minor on account of any injury of any kind arising out of or in the course of any operation of the Ice Vault. I grant the Ice Vault the right to use all photographs and videos taken of me during any Ice Vault programs for advertising purposes.

Signature _____ Date ___/___/___