



All-Inclusive Ice Contract for the 2019-2020 Skating Season

Skater Name: _____ Skater Level: _____

Coach(es): _____

Option A: I choose to pay the full cost of an All-Inclusive Ice contract. **\$3400**

- I do not need to select hours that my skater will be skating
- I do not need to volunteer
- I must meet show requirements, if in the spring show

Option B: Club Ice times included in this All-Inclusive Ice Contract (August 3rd – April 26th) **\$2475**

Day	Session Time*	# of Sessions*	Plan to skate
Sunday	4:15-6:15 pm	37	
Monday	5:45-7:15 am	34	
Tuesday	5:45-7:15 am	33	
Wednesday	6:45-7:45 pm	35	
Thursday	5:45-7:15 am	31	
Friday	3:45-4:45 pm	30	
Saturday	7:15-9:15 am	35	

*See Club Calendar for dates - Subject to change

Requirements to maintain this All-Inclusive Ice contract are:

- Ice monitor - ~20/semester – Total of 40 spots for the year
- Volunteer
- Skate 75% of each Prime Ice time slot; unless skater indicates below they are willing to forego Prime Ice Times (see days & times below)

I choose to give up the following Prime Ice times: **Circle** the days and times you wish give up

Wednesdays (6:45-7:45 pm)

Sundays (4:15-5:15 pm)

Saturdays (8:15-9:15 am)

Sundays (5:15-6:15 pm)

Locker Request (you must complete a locker agreement) –This will be added to your ice bill[#]

- Small Locker (\$40/semester)
- Large Locker (\$60/semester)

[#]If you fulfill the requirements for skate squad you will receive a \$40 credit at the end of each semester.

_____ I understand that when contracting the All Inclusive Ice Plan skaters must actually skate and document the hours required to meet the spring ice show solo, feature, or duet/trio role requirements. All skaters must sign-in with the ice monitor at the start of the ice session and out at the conclusion of their session. In the event there is no monitor present any AFSC coach may be asked to initial the attendance sheet.

initial

Skater Name _____

_____ initial
I understand that any special AFSC sessions added in addition to the above contract are not included in this All-Inclusive Ice Contract nor will I be reimbursed for any ice sessions that are cancelled due to weather, coach absence or any other unforeseen circumstances.

_____ initial
I understand that the requirements listed in this contract are in addition to the requirements for the Spring Ice Show. If these requirements are not met I will be required to pay the actual cost of contracted ice (\$3400). In addition, I may not be eligible for an all-inclusive ice contact for the next session.

_____ initial
I understand that I am not guaranteed prime ice time spots (Wed, Sat, and Sun). These spots are assigned in a first come, first serve basis. If I am required to give up some of my prime ice spots this is my order preference for **giving up** spots. _____ Wed _____ Sat _____ Sun

By signing, I understand that this is a binding contract and I am responsible for paying all contracted ice and classes. If the skater is unable to skate due to injury or other unforeseen circumstances, they are still responsible for paying for all contracted ice & classes unless otherwise approved by the AFSC Board of Directors.

Signature _____
(Parent/Guardian, if under 18)

Date: _____

Payment options

All Inclusive Ice Contract Cost (Circle Option)	A:\$3400	B:\$2475	\$
Locker Fee (if requested)			+ \$
Total Amount Due			_____ \$

Payment Method (9 Months) Circle Payment Method:

- Coupons – Send payment coupon sheet by e-mail _____
- Automatic withdrawal – Complete a ACH withdrawal form

Club use only:	Date Received _____	Order Received _____
ACH form _____	Locker Contract _____	Not skating: Wed Sat Sun