

ADULT SKATING SESSION



#1 IN WESTERN NEW YORK, TOP TEN IN THE U.S.

Adult - Beginner thru Advanced

THURSDAY AFTERNOONS

1:00 – 2:00

**HOCKEY
COACHES
WELCOME!**

**HOCKEY
PLAYERS
WELCOME!**

This class is designed for the adult who would like to learn the basics of ice skating, improve skating skills, or be able to skate confidently without the use of a walker or the boards. This group session is a great way to meet new people, exercise and improve balance and coordination.

- ❖ REGISTER ONLINE/ BY MAIL NOW TO RESERVE YOUR SPOT!
- ❖ Great exercise - **11 Laps = 1 Mile!!**
- ❖ Free Loaner Skates Available (Limited Quantity)
- ❖ Private & Semi-Private Lessons
- ❖ *Total amount includes testing fees*
- ❖ 1 Hour Session Includes: 30 min. lesson & 30 min. of practice
- ❖ Year-Round Programs

**Adult Skating Session
Leisure Rinks
1:00 – 2:00**

Session 1 - Sept. 24, Oct. 1, 8, 15, 22, 29, Nov. 5, 12
 Session 2 - Nov. 19, Dec. 3, 10, 17, Jan. 7, 14, 21, 28
 Session 3 - Feb. 4, 11, 18, 25, March 4, 11, 18, 25

For Information contact:

Janice Smith (716) 580-3458 or Jessica Lauria (716) 228-0036

**Price Includes USFS Membership, Skating Manual, Instruction, Testing, Practice Time.*

www.skategreatinc.com

Registration Form – LTS Adult Skating
 Make check or money order payable to:
 Skate Great Inc.
 11 Brynstone Court, Amherst, NY 14228



LEISURE RINKS
 75 Weiss Road
 Orchard Park, NY 14224

HOLIDAY TWIN RINKS
 3465 Broadway
 Cheektowaga, NY 14227

Name _____

Address _____ City _____ Zip _____

Phone _____ Male/Female _____ Birthdate _____

*E-mail (discounts & announcements) _____ Badge Level _____

<u>Session:</u>	<u>Day:</u>	<u>Time:</u>	<u>Rink:</u>	<u>Amount:</u>
Session 1 _____	Thursdays	1:30– 2:00 (Practice 1:00 – 1:30)	Leisure Rinks	\$95.00
Session 2 _____	Thursdays	1:30– 2:00 (Practice 1:00 – 1:30)	Leisure Rinks	\$95.00
Session 3 _____	Thursdays	1:30 – 2:00 (Practice 1:00 – 1:30)	Leisure Rinks	\$95.00

Do you need rental skates? YES / NO Size: _____ Interested in private lessons? YES / NO

Member of USFS: YES / NO

Total amount paid: _____ Check # _____ Receipt # _____ Date: _____

Skate Great, Inc assumes no responsibility for any accident or injury to any participant. No Refunds / Exchanges. \$50.00 fee for all returned checks.