

# BRAEMAR

## 2012-2013 SKATING PROGRAM SCHOOL-YEAR ICE CONTRACT



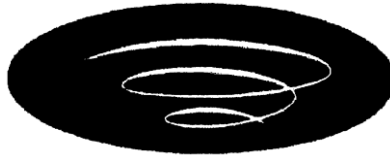
SEND COMPLETED FORMS TO:  
BCLFSC  
c/o Ice Coordinator  
P.O. Box 390301  
Edina, MN 55439-0301

**Application Due To Ice Coordinator by:  
Saturday, August 11, 2012**

**Braemar Professional Staff**

<b>Joan Orvis (Head Professional)</b>			
<b>Samiera Abou-Nasr</b>	<b>651-231-0535</b>	<b>Loni Keenan</b>	<b>952-929-8591</b>
<b>Judy Johnson Bouts</b>	<b>612 386 4832</b>	<b>Ari Lieb</b>	<b>612-718-3491</b>
<b>Sarina David</b>	<b>763-424-8480</b>	<b>Pamela May</b>	<b>612-616-3575</b>
<b>Kathleen Schmelz Gazich</b>	<b>952-930-0224</b>	<b>Jean Pastor</b>	<b>952-926-6394</b>
<b>Rosie W. Hanson</b>	<b>612-710-1229</b>	<b>Diane DeMoss Powers</b>	<b>952-944-3374</b>
<b>Thomas Incantalupo</b>	<b>651-270-2206</b>	<b>Toni Swiggum</b>	<b>952-447-4428</b>
<b>Caryn Kadavy</b>	<b>814-434-9359</b>	<b>Anders Wisnewski</b>	<b>612-722-3419</b>

If you have questions regarding the Braemar 2012-2013 Program,  
please contact the Ice Coordinator at [ice@braemarfsc.org](mailto:ice@braemarfsc.org)



Dear BCLFSC Families:

Welcome to another year of skating! Although summer is just beginning, it's time to plan for fall activities and ice purchases. As an organized club, we serve as a "purchasing agent" to buy ice time from the City of Edina. We subdivide our ice hours into sessions, which our skaters use for training. Needless to say, our quantity purchases (and subsequent resale to you) make this sport more affordable.

- Each skating member of our club is required to purchase **two** ice sessions per week.
- We will continue to have the **ice exchange policy**. **Ice can be exchanged 7 days before or 7 days after the missed ice session.**
- An ice for ice exchange can be done for Workout sessions missed.
- Exchanges into sessions by BCLFSC members have priority over buy-ons for non-BCLFSC members.
- The contract rate for ice is \$12 per session when 2 sessions are contracted.
- The contract rate for ice is \$10 per session when 3 or more sessions are contracted.
- The contract rate for the power class is \$17. The buy on rate for power is \$20.
- The buy-on rate is \$14 per session for those contracting 2 – 4 sessions.
- The buy-on rate is \$12 per session for those *skater families* who contract **five** or more sessions per week.
- Contract and buy-on rates are subject to change based on approval by the BCLFSC Board of Directors.
- All member families, who contract for ice are required to ice monitor an ice session three times per each three-month period as follows: (September, October, November), (December, January, February) and (March, April, May), or be billed a fee of \$30 at the close of each three-month period.

Sincerely,

The BCLFSC Board of Directors

# BRAEMAR-CITY OF LAKES FSC SKATING PROGRAM SCHOOL-YEAR ICE CONTRACT

## September 4, 2012 to June 7, 2013

Skater's Name \_\_\_\_\_

Phone (with area code) \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Professional: \_\_\_\_\_ Home Club \_\_\_\_\_ USFS# \_\_\_\_\_

Highest USFSA test *passed* as of July 31, 2012: \_\_\_\_\_ Free Skate \_\_\_\_\_ Moves in the Field \_\_\_\_\_

Type of Membership: \_\_\_\_\_ Home Club \_\_\_\_\_ Associate \_\_\_\_\_ Junior Club \_\_\_\_\_ Adult/College Skater

How many sessions per week are you requesting? \_\_\_\_\_

Number the sessions you request in the order preferred. For example, if you are requesting three sessions per week, the sessions numbered one through three would be your *ideal schedule*. Numbers four, five, six, etc., would be *second choices*. Please provide second choices in case all your first choice sessions are filled.

SUN AMA__ 10:30-11:30 a.m. <b>Open FS</b> <b>Junior Club</b>						SAT AMA__ 7:30-8:20 a.m. <b>Open FS</b> <b>Junior Club</b>
	MON PMA__ 3:00-3:50 p.m. <b>Open FS</b>	TUE PMA__ 3:00-3:50 p.m. <b>Open FS</b>	WED PMA__ 3:00-3:50 p.m. <b>Open FS</b>	THU PMA__ 3:00-3:50 p.m. <b>Open FS</b>	FRI PMA__ 3:00-3:45 p.m. <b>Open FS</b>	SAT AMB__ 8:30-9:20 a.m. <b>Open FS</b>
	MON PMB__ 4:00-4:50 p.m. <b>FS &gt;= Juv</b> <b>or MIF &gt;= NM</b>	TUE PMB__ 4:00-4:50 p.m. <b>FS &gt;= Juv</b> <b>or MIF &gt;= NM</b>	WED PMB__ 4:00-4:50 p.m. <b>FS &gt;= Juv</b> <b>or MIF &gt;= NM</b>	THU PMB__ 4:00-4:50 p.m. <b>FS &gt;= Juv</b> <b>or MIF &gt;= NM</b>	FRI PMB__ 3:55-4:40 p.m. <b>FS &gt;= PF or</b> <b>MIF &gt;= PJM</b>	SAT AMC__ 9:30-10:20 a.m. <b>FS &gt;= PJF</b> <b>or MIF &gt;= JM</b>
	MON PMC__ 5:00-5:50 p.m. <b>FS &gt;= PM</b>	TUE PMC__ 5:00-5:50 p.m. <b>FS &gt;= PF or</b> <b>MIF &gt;= PJM</b>	WED PMC__ 5:00-5:50 p.m. <b>Open FS</b>	THU PMC__ 5:00-5:50 p.m. <b>FS &gt;= PF or</b> <b>MIF &gt;= PJM</b>	FRI PMC__ 4:50-5:35 p.m. <b>Open FS</b>	
	MON PMD__ 6:00-6:45 p.m. <b>Open FS</b>	TUE PMD__ 6:00-6:50 p.m. <b>Open FS</b> <b>Junior Club</b>	WED PMD__ 6:00-6:50 p.m. <b>Open FS</b>	THU PMD__ 6:00-6:50 p.m. <b>Open FS</b>	FRI PMD__ 5:35-6:05p.m. <b>Power Class</b>	
<b>Contracted Power Class is \$17.00</b> <b>All other sessions are \$12.00 per session.</b>					FRI PME__ 6:15-7:00 p.m. <b>Open FS</b> <b>Junior Club</b>	

**Buy on Prices:** Members will be billed for buy on (no checks) and the cost \$14.00 per session.  
 Members contracted for 5 or more sessions will be able to buy on at the contract rate of \$12.00.  
 Power Class contract is \$17.00 Buy on Power Class is \$20.00

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## ADDITIONAL INFORMATION

1. Ice sessions are permanently assigned for the season on the basis of seniority in the Club. Seniority is based on:  
a) BCLFSC Home Club Membership; b) date of becoming a BCLFSC Home Club Member; c) test level; and d) date of attaining that test level. This priority applies to contracts beginning September 4, 2012. Any permanent ice added or begun after September 4, 2012 will be on an "as available" basis.
2. Only 22 skaters can be assigned to each session.
3. **Permanent ice is contracted ice which is divided into three periods:**  
**Fall (September, October, November)**  
**Winter (December, January, February)**  
**Spring (March, April, May, June),**  
**and cannot be dropped except at the end of a contracting period. NO EXCEPTIONS, other than injury as described below.**
4. Sessions marked >=JF are reserved for skaters who have passed the USFS Juvenile free skate test  
Sessions marked >=PJF are reserved for skaters who have passed the Pre-Juvenile free skate test.  
Sessions marked >=PF are reserved for skaters who have passed the Preliminary free skate test.  
Sessions marked >=NM are reserved for skaters who have passed the Novice moves test.  
Sessions marked >=IM are reserved for skaters who have passed the Intermediate moves test.  
Sessions marked >=JM are reserved for skaters who have passed the Juvenile moves test.  
Sessions marked >=PJM are reserved for skaters who have passed the Juvenile moves test.  
Sessions marked >=PPF are reserved for skaters who have passed the Pre-Preliminary free skate test.  
Sessions marked >=PPM are reserved for skaters who have passed the Pre-Preliminary moves test.
5. Ice may also be purchased on a session-by-session basis (buy-on), if available, from the stand-by list. The price is \$14 for members and will be billed (no checks or cash). Skaters contracted for 5 or more sessions will be able to buy on at the contract rate of \$12 per session. The price for the power class is \$17. Buy on for power class is \$20. Skaters contracted for 3 or more sessions have the contract rate of \$10 per session.
6. The Club reserves the right to re-designate or cancel any session for which there are insufficient contracts. The Club also reserves the right to change contract dates based on ice availability. Skaters will be notified of time changes and cancellations on a monthly basis through the Club calendar or through an email blast or through signs at the arena.
7. Membership application and dues for the 2012-2013 club year must be received **before** this ice application can be processed. **Ice application must be received by 8/11/2012** to be included in the initial permanent ice assignment. Applications received after the **8/11/2012** (for the Fall period) will be assigned permanent ice on a space-available basis and a **\$25 service fee** will be charged. There will be a \$20 charge on any checks returned for non-sufficient funds. If payment for bills is received after the due date on the bill, there will be a \$15 late fee added.

Ice Application Acceptance: I understand that if ice sessions requested on this form are assigned to my skater, I will be billed each month for that assignment for the entire ice period, unless I send an "Ice Change Request" to the Ice Coordinator by the first of the month prior to the next contracting period (i.e. by **November 1, 2012** for the Winter period and **February 1, 2013** for the Spring period). **The only exception is in case of injury or long-term illness, for which a letter of explanation from the skater's physician is required within 10 days of illness or injury (per Club policy).** I agree that all club bills incurred by my skater shall be paid (received) by the 30<sup>th</sup> day of the month. I also agree to pay any expense incurred as a result of attempting to collect any monies owed to Braemar-City of Lakes Figure Skating Club.

Signature of Parent or Guardian /Date \_\_\_\_\_

Professional's Signature/Date \_\_\_\_\_

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**Braemar Figure Skating Program**  
**MEDICAL/EMERGENCY INFORMATION FORM**  
**(2012-2013)**

**Skater:** \_\_\_\_\_

**Street:** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_

**Work or Cell Phone:** \_\_\_\_\_

**Father's Name:** \_\_\_\_\_

**Work or Cell Phone:** \_\_\_\_\_

**Physician's Name & Phone** \_\_\_\_\_

**Dentist's Name & Phone** \_\_\_\_\_

**Orthodontist's Name & Phone** \_\_\_\_\_

**Preferred Hospital:** \_\_\_\_\_

**Allergies or Other Medical Conditions:** \_\_\_\_\_

\_\_\_\_\_

**Medications:** \_\_\_\_\_

*In case of emergency, you have my permission to give emergency treatment and transport my child to an appropriate medical facility. I am responsible for all expenses resulting from emergency treatment and/or transport.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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