Learn To Skate USA* Registration
Taught by Annapolis Skating Academy* at the Brigade Sports Complex

Session #4
Saturdays: February 15th - March 28th
NO CLASS SATURDAY MARCH 14TH
Tuesdays: February 18th - March 24th

Authorized Patrons: $105   Civilians: $115
+ required $20 Learn to Skate USA Annual Membership Fee
(Basic 1 & higher)

(Skaters already holding a LTS USA membership need not re-enroll, but must provide proof of membership)

Each registration includes 6 FREE Open Skate Admissions! Open Skate punch card will be provided.
( Redeemable only during the current 6 week Session by the participant enrolled, and does not include skate rental)

Your Child’s First Day of Skating

Helmets. All Snowplow Sam skaters are required to wear one, and it is suggested for all other beginning skaters. Helmets approved by the US Consumer Product Safety Commission (CPSC) are suggested. Fasten buckle and check strap adjustment often. Don’t allow your skater to wear anything under the helmet, and replace immediately if it shows any visible signs of damage. Never allow them to wear a helmet that does not fit or cannot be adjusted properly. THE BSC DOES NOT PROVIDE HELMETS.

Keep their hands warm. Since kids are taught to fall on day one, gloves or mittens are imperative to prevent hands from getting all scraped up.

Fitting Skates. Try on skates until the most comfortable pair is found. The rule of thumb: the closer the fit, the more control. Boots should be snug, giving toes just enough wiggle room without pinching. Feet should be immobile with the heel far back in the boot. Solid support is also necessary as staying upright takes a considerable amount of strength.

Note: Be aware that rental skates are designed to fit everyone. Shoe size does not necessarily match skate size. For help, use sizing mat located at Skate Rental.

Interested in competing or private lessons?
Competitions exist for all levels! If at any time during the program your skater is interested in competing, please contact Kristan Waggoner, Director of Annapolis Skating Academy.
Phone: 410-293-9708   Email: annapolis.skating@gmail.com

Brigade Sports Complex
64 Greenbury Point Rd
Annapolis, MD 21402
410-293-9700
Fax: 410-293-9712

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Session #4
Saturdays: February 15th - March 28th
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<thead>
<tr>
<th>SATURDAY</th>
<th>TUESDAY</th>
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<tr>
<td>2:00</td>
<td>11:30</td>
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<tr>
<td>Snowplow 3</td>
<td>Home School</td>
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<td>2:30</td>
<td>12:00</td>
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<tr>
<td>Freestyle 1</td>
<td>Snowplow 1</td>
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<td>3:00</td>
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<td>Freestyle 2</td>
<td>Snowplow 4</td>
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<tr>
<td>Basic 1</td>
<td>Prep</td>
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<tr>
<td>Freestyle 3</td>
<td>Intro to Hockey*</td>
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<td>Basic 2</td>
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<td>Freestyle 4</td>
<td>Basic 3</td>
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<td>Basic 3</td>
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<tr>
<td>Freestyle 5</td>
<td>Basic 4</td>
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<td>Basic 4</td>
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<td>Freestyle 6</td>
<td>Freestyle 1</td>
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<td>Advanced Freestyle</td>
<td>Freestyle 2</td>
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<tr>
<td>Intro to Hockey*</td>
<td>Freestyle 3</td>
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**Helmets required for ALL Snowplow levels**
THE BSC DOES NOT PROVIDE HELMETS.

Authorized Patrons: $105   Civilians: $115
+ required $20 USFS Annual Membership Fee (Basic 1 & higher)

Name __________________________ Age ________
Gender (M or F) ______ Level ________ Time ________

2019/2020 USFS # (if already registered)
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Parent Name __________________________
Address __________________________
City __________________________ State ________ Zip __________
Home __________________________ Cell __________________________
Email __________________________

Visa/MC/AX Name on Card

CC # __________________________ Exp __________ CVV __________

Waiver: I approve of my child’s attendance at the Brigade Sports Complex and certify that he/she is in good health and able to participate in the program activities. Please indicate if your child suffers from allergies, asthma, diabetes, restricted activities, etc.

In further consideration of the Brigade Sports Complex accepting this application, I hereby agree to save and indemnify and keep harmless the BSC, its agents, sponsors and employees against any and all liability, claims, judgments or demands for damages arising as a result of injuries sustained by the applicant during or as a result of any course given the applicant of the Brigade Sports Complex Learn to Skate Program.

Medical Information-Authorization: I, being the guardian of the above applicant, authorize the Brigade Sports Complex and its agent’s permission to request medical treatment as necessary to insure the well being of the applicant.

Parent/Guardian Signature __________________________