

## TEAM SKATING

Synchronized Teams Friday 4:00pm Theatre Production Saturday 8:00am

Choose BOTH team days for special pricing!

## 2019-2020 SKATING TEAM INFORMATION

FMC Ice Sports Natick is pleased to offer Synchronized Skating and Theatre Production Teams. Team skating offers individual skaters the opportunity to experience the fun and excitement of a team sport. Theatre Productions and Synchronized Skating have become the hottest form of figure skating today. Our teams will follow the Ice Skating Institute criteria.

**Synchronized Skating** is a group number for 8 or more skaters to perform in unison. They can incorporate various skating formations such as circles, pinwheels, lines, footwork sequences and dance steps to music with exact precision.

Theatre Production is for skaters of all ages and ability level. This is a creative and artistic program usually based on a story or theme, using costumes, props and technical skating to enhance the production performance.

Teams will be divided by age grouping	COME JOIN THE Fings (age determined a	_	) as well as skating	ability.
FMC ICE SPOR	TS SKATING TE	AM REGIST	RATION	
Choose one team for \$648.	.00 - add a seco	nd team foi	an additional	\$200.00!
<ul> <li>Synchronized Skating</li> <li>Fridays at 4:00pm</li> </ul>	□ Theatre Prode Saturdays at	e Production □ Both Teams days at 8:00am Friday and Saturdays!		
DOPTION 1 - \$648 Registration for one	<u>e team</u> 🗆 Ol	PTION 3 - \$8	48 Registration	for two teams
\$99 Deposit Due by 9/13/19		\$99 Deposit Due by 9/13/19		
\$549 Deposit Due by 10/25/19		\$749 Depos	it Due by 10/25/	19
□ OPTION 2 - \$697 Payment Plan for or	ne team □ OF	PTION 4 - \$89	7 Payment Plar	for two teams
\$99 Deposit Due by 9/13/19		\$99 Deposit Due by 9/13/19		
\$349 Installment 1 due by 10/25/19	\$399 Installment 1 due by 10/25/19			
\$249 Installment 2 due by 12/13/19		\$399 Installment 2 due by 12/13/19		
Fee Includes: Ice fee, coaching fees, ISI m Competition and May Ice Show fees. Other I  Commitments must be for entire sea	ocal competitions m	ay be added fo	r additional fees.	·
First Name of Skater	Last Name of Skater			Birthday
Address		City	State	Zipcode
Daytime Phone	Email Address			
ISI Level Passed USFS	Level Passed	# of Hours You Skate (Not Including Teams)		
I, the undersigned, do hereby acknowledge to	hat my child by participa	ting in Synchroniz se that Facility Ma	ed Skating Team may	be exposed to risk

**Date** 

Sports Staff are not responsible for any damage or injuries that result from their

participation in this program.

Parent/Guardian Signature