

PRACTICE ICE ORDER FORM (DUE BY August 11, 2010)



Online Instructions

1. Enter skater's contact information
2. Check which sessions you wish to skate.
3. Print the completed form and mail page two with your check made out to "**Skate Chautauqua**" to:

**Skate Chautauqua
Practice Ice
3030 Chautauqua AVE
Ashville, NY 14710**

Competitor's Name: _____ Level: _____
 Parent/Guardian: _____ Phone: _____
 Email: _____ Home Club: _____
 Street Address: _____ City: _____ State/Zip: _____

Friday, August 13, 2010 Practice Sessions

Check	Session	Start Time	End Time	Rink	Cost	Totals
	Paid Practice A1	8:00 AM	8:20 AM	A	\$8	
	Paid Practice A2	8:20 AM	8:40 AM	A	\$8	
	Paid Practice A3	11:00 AM	11:20 AM	A	\$8	
	Paid Practice A4	1:48 PM	2:08 PM	A	\$8	
	Paid Practice A5	2:08 PM	2:28 PM	A	\$8	
	Paid Practice B1	8:20 AM	8:40 AM	B	\$8	
	Paid Practice B2	9:56 AM	10:16 AM	B	\$8	

Saturday, August 14, 2010 Practice Sessions

Check	Session	Start Time	End Time	Rink	Cost	Totals
	Paid Practice A6	8:00 AM	8:20 AM	A	\$8	
	Paid Practice A7	8:20 AM	8:40 AM	A	\$8	
	Paid Practice A8	10:51 PM	11:11 PM	A	\$8	
	Paid Practice A9	11:11 PM	11:31 PM	A	\$8	
	Paid Practice A10	2:15 PM	2:35 PM	A	\$8	
	Paid Practice A11	2:35 PM	2:55 PM	A	\$8	
	Paid Practice B3	8:20 AM	8:40 AM	B	\$8	
Total Due:						

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