

STR

Stamford Twin Rinks

1063 Hope Street
Stamford, CT 06907
(Tel.) 203-968-9000, ext. 16
(Fax) 203-321-1522
www.stamfordtwinrinks.com

**Figure Skating Training Center
Springdale Figure Skating Club
Springdale Ballet & Dance Academy**

13th Annual **Summer Figure Skating & Ballet School**

June 29 - August 29, 2009

(Plus, Figure Skating Add-ons: June 22 - 27 & Aug. 31 - Sept. 5)

The Facility:

- ♦ Two ice sheets (200' x 85')
- ♦ Jumping harness
- ♦ Digital sound system
- ♦ Professional skate sharpening
- ♦ Mirrored dance studio
- ♦ Aerobic & strength training studios
- ♦ Home to three "synchro" teams
- ♦ Four off-ice meeting rooms
- ♦ Legends Café
- ♦ Ice View Sports Bar and Grill
- ♦ New York Sports Club
- ♦ Red Line Sports shop

The Staff:

- ♦ Emily and Frank Cassella, Directors
- ♦ Terri Ann Lowenthal, Asst. Director
- ♦ June Clark
- ♦ Deborah Foll
- ♦ Tamara Guarino
- ♦ Ekaterina Gvozdkova
- ♦ Susan Marie Hamel-Bottari
- ♦ Frances Gold Lind
- ♦ Larissa Lomonosova
- ♦ Lea Ann Miller
- ♦ Yalin Murdock
- ♦ Marina Spagnuolo
- ♦ Janet Thompson
- ♦ Rebecca Werdelin
- ♦ Deanna Bergdorf, Ballet/Dance Director
- ♦ Todd Murray, Fitness Director

The Programs:

- ♦ **Summer Figure Skating School** - A comprehensive program, Monday - Friday, including practice sessions, private lesson availability, on-ice clinics, ballet, dance, fitness. *Build your own program!* Choose from full or half summer options. *Legends Café* will meet your dining needs.
- ♦ **Figure Skating Session Subscriptions** - Choose from *up to 5 sessions daily* and *save!* (Minimum number of weekly sessions required for subscriptions.) Available Monday - Saturday. Full or half summer options.
- ♦ **Springdale Ballet & Dance Academy** - Ballet, hip hop, jazz, stretching, and fitness classes compliment on-ice training. Available Monday - Friday on a subscription basis or as part of your Figure Skating School program.

Convenient location! State-of-the-art facility! Top-flight coaching staff!

FOR DEDICATED SKATERS & RISING STARS ALIKE!

PROGRAM DESCRIPTIONS

SUMMER FIGURE SKATING SCHOOL

(Monday - Friday)

Full Season (9 wks): June 29 - Aug. 28

Session I (5 wks): June 29 - July 31 **Session II (4 wks):** Aug. 3 - Aug. 28

Daily: One (1) or two (2) ice sessions (you choose!)
Stroking & skating clinic (jumps, spins, footwork,
dance, synchronized skating, program practice)

Weekly: One (1) ballet class
One (1) each of the following dance classes:
Hip Hop; Broadway Dance; Off-Ice Stretching; Yoga-laties

DESIGN YOUR OWN DAILY PROGRAM! To register on attached form:

- ♦ Choose *full* or *half* summer program. **Any single weeks also available!**
- ♦ Choose your daily figure skating session(s).
- ♦ Weekly ballet class and other off-ice classes. (10:00-10:50 am, daily)
- ♦ Subscribe or walk-on to extra figure skating sessions.
- ♦ Walk-on to extra off-ice classes.
- ♦ Arrange private lessons with the professional coach of your choice.
- ♦ *Registering for three or more weeks?* Choose your T-shirt size!

FIGURE SKATING SESSION SUBSCRIPTIONS

(Monday - Saturday)

Full Season (9 wks): June 29 - Aug. 29

Session I (5 wks): June 29 - Aug. 1 **Session II (4 wks):** Aug. 3 - Aug. 29

- ♦ Single sessions available on subscription basis.
- ♦ **Minimum requirements for subscription price:** 20 sessions per half summer (Session I or Session II); 30 sessions for full season.
- ♦ Want to add to initial subscription? Choose additional sessions in *blocks of 20* to qualify for subscription price.

SPRINGDALE BALLET & DANCE ACADEMY

(Monday - Friday)

Full Season (9 wks): June 29 - Aug. 28

Session I (5 wks): June 29 - July 31 **Session II (4 wks):** Aug. 3 - Aug. 28

- ♦ Available as part of Summer Figure Skating School or as *independent program*. See attached schedule of classes and registration form.
- ♦ **Adults:** *Subscribe* for full or half summer, or *buy a 10-class punch card!*
- ♦ Private lessons available by appointment.

PLEASE NOTE THE FOLLOWING IMPORTANT PROGRAM RULES:

- ♦ A **\$25 processing fee** will be charged for each **change of designated sessions or weeks** once registration is received.
- ♦ Figure skating and ballet/dance/fitness walk-ons are allowed if sessions or classes are not full.

SUMMER SKATING AND OFF-ICE SCHEDULES

June 29 - August 29, 2009

Skating School Students & Subscribers: Check-in at Admissions and pick up leg sticker daily

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
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FIGURE SKATING

7:00-7:50 am Freestyle/Dance	7:00-7:50 am Freestyle/Dance	7:00-7:50 am Freestyle/Dance	7:00-7:50 am Freestyle/Dance	7:00-7:50 am Freestyle/Dance	
8:00-8:50 am Freestyle	8:00-8:50 am Freestyle	8:00-8:50 am Freestyle	8:00-8:50 am Freestyle	8:00-8:50 am Freestyle	8:00-8:50 am Freestyle/Dance
9:00-9:50 am Adult/Low Freestyle	9:00-9:50 am Adult/Low Freestyle	9:00-9:50 am Adult/Low Freestyle	9:00-9:50 am Adult/Low Freestyle	9:00-9:50 am Adult/Low Freestyle	9:00-9:50 am Freestyle
					10:00-10:50 am Adult/ Low Free
11:00-11:30 am Power Skating Clinic	11:00-11:30 am Skating Clinic	11:00-11:30 am MIF Clinic	11:00-11:30 am Skating Clinic	11:00-11:30 am Skating Clinic	
11:30-12:20 pm Freestyle/MIF	11:30-12:20 pm Freestyle/MIF	11:30-12:20 pm Freestyle/MIF	11:30-12:20 pm Freestyle/MIF	11:30-12:20 pm Freestyle/MIF	
1:30-2:20 pm Freestyle	1:30-2:20 pm Freestyle	1:30-2:20 pm Freestyle	1:30-2:20 pm Freestyle	1:30-2:20 pm Freestyle	

BALLET

		9:00-9:45 am Ballet 6-7 yrs.		9:00-9:45 am Ballet 6-7 yrs.	
		10:00-10:50 am Pre-Ballet 3-5 years		10:00-10:50 am Ballet all ages, intermediate	
		11:00-11:45 am Ballet 8-11 yrs.		11:00-11:45 am Ballet 8-11 yrs.	

OFF-ICE CLASSES

9:00-9:45 am Hip Hop 8-11 yrs.	9:00-9:45 am Broadway Dance 8-11 yrs.	9:00-9:45 am Fitness 4 Kids 8-11 yrs.	9:00-9:45 am Yoga-laties 8-11 yrs.		
10:00-10:50 am Hip Hop all ages, intermediate	10:00-10:50 am Broadway Dance all ages, intermediate	10:00-10:50 am Fitness all ages	10:00-10:50 am Yoga-laties all ages		
11:00-11:45 am Hip Hop 6-7 yrs.	11:00-11:45 am Broadway Dance 6-7 yrs.	11:00-11:45 am Fitness 4 Kids 6-7 yrs.	11:00-11:45 am Yoga-laties 6-7 yrs.		

SINGLE Skating Sessions, On-ice Clinics, & Off-ice Classes

"WALK-ON" FEE: \$18

- ♦ Pay in advance at Admissions window.
- ♦ Valid only on day of purchase.
- ♦ Wear leg sticker (skating)
or give sticker to teacher at start of class (off-ice)

Don't forget: *Subscribe to skating sessions and off-ice classes, and SAVE!*

2009 SUMMER PROGRAMS REGISTRATION FORM

Please fill out a separate registration form for each member of the family.

Personal information:

Name _____ Age _____ Birthdate _____
 Address _____
 City _____ State _____ Zipcode _____
 Home phone _____ E-mail _____
 Parent(s) names _____
 Work phone _____ Cell phone _____

Skating information:

Home Club _____ USFSA Reg. # _____ Coach _____
 Tests passed: Figure _____ Moves _____ Freestyle _____ Dance _____

SUMMER FIGURE SKATING SCHOOL

Season choice (check one):

- Full season (9 wks)
- Session I (5 wks)
- Session II (4 wks)
- Single weeks

Daily ice sessions (check one) and Fees:

- One (\$1,260)
- One (\$ 810)
- One (\$ 648)
- One (\$ 195)
- Two (\$1,665)
- Two (\$1,050)
- Two (\$ 840)
- Two (\$ 260)

Amount due:

\$ _____
 \$ _____
 \$ _____
 \$ _____

Choose your **daily** skating session(s) from attached schedule: 1. _____ 2. _____

Specify **single week** choices (if applicable): 6/29 7/6 7/13 7/20 7/27 8/3 8/10 8/17 8/24

Tell us your **T-shirt size** (if registering for 3+ weeks): Small Medium Large Extra large

Want to skate more? Fill out next section to add *subscribed* figure skating sessions.

SUBSCRIBED FIGURE SKATING SESSIONS

Subscription rate for all **50-minute sessions**:

\$13.00 per session

Please choose a **minimum of 30 sessions for Full Season** or a **minimum of 20 sessions for Session I or Session II** from the attached Figure Skating Schedule. Summer Figure Skating School students receive preference for choice of sessions.

Full Season (9 wks.)

Session I (5 wks.)

Session II (4 wks.)

Tell us the days & starting times for your session choices for each week. For example, put "Mon. - Fri., 7:00 AM & 9:00 AM" (which gives you 10 sessions towards your half or full season minimum requirement) or "T/Th, 1:30 PM."

6/29-7/4 _____ Aug. 3-8 _____
 July 6-11 _____ Aug. 10-15 _____
 July 13-18 _____ Aug. 17-22 _____
 July 20-25 _____ Aug. 24-29 _____
 7/27-8/1 _____

Big savings!
Compare to \$18
Walk-on rate!

Total # of subscribed sessions _____ x **\$13.00** = \$ _____

Deposit (minimum 50% deposit due with all registrations) \$ _____

Paying in full before June 1, 2009? **Deduct 5% of amount due!** \$ _____

Balance due (by June 1, 2009; discount applies to balance only) \$ _____

NO DISCOUNTS OR REFUNDS AFTER JUNE 1. NO MAKE-UPS.
NO RE-SELLING OF ICE TIME. \$25 FEE TO CHANGE SESSIONS/WEEKS.

2009 SUMMER PROGRAMS REGISTRATION FORM

SPRINGDALE BALLET AND DANCE ACADEMY SUBSCRIPTIONS

Choose from ballet, dance, and fitness classes on attached schedule. Prices are for one class per week.

Season choice (check one):	Fees:	# of classes/week	Amount due:
<input type="checkbox"/> Full season (9 wks)	\$117	x _____	\$ _____
<input type="checkbox"/> Session I (5 wks)	\$ 75	x _____	\$ _____
<input type="checkbox"/> Session II (4 wks)	\$ 60	x _____	\$ _____

Choose your class(es) from attached schedule:

Class _____ Day _____ Time _____ Age/Level _____
 Class _____ Day _____ Time _____ Age/Level _____

Off-ice fees (payment in full required) \$ _____
 Paying in full before June 1, 2009? **Deduct 5% of amount due!** \$ _____
Total due \$ _____

Add single classes to your summer fun!

- ==> **Walk-on rate for single off-ice classes -- \$18.00**
- ==> Pay in advance at Admissions window for single off-ice classes.
- ==> Day-of-class purchases only!
- ==> Show walk-on sticker to instructor at start of class.

TOTAL PAYMENT INFORMATION

Return in person or by mail to: STR, 1063 Hope St., Stamford, CT 06907

PLEASE NOTE: Refunds until 6/1/09, less 15% service charge. No refunds or discounts after 6/1/09.

Summer Figure Skating School balance (from previous page)	\$ _____
Figure Skating Session Subscriptions (from previous page)	\$ _____
Springdale Ballet & Dance Academy (from above)	\$ _____
TOTAL AMOUNT ENCLOSED	\$ _____
Balance due by June 1 (if any)	\$ _____

Payment options: Cash Check (payable to Stamford Twin Rinks)
 Visa Mastercard *Credit card #:* _____ *Exp. Date* _____
 Cardholder's signature _____ *Date* _____

THANK YOU! WE APPRECIATE YOUR BUSINESS!

Please read and sign waiver below.

I agree to waive liability and release any and all claims against RivCan Associates, owner ("Owner") of Stamford Twin Rinks (the "Facility"), its owners, Springdale Figure Skating Club, its members, and all of their officers, employees and agents and the Springdale Ballet Academy for injuries and damages suffered by myself or my children 18 or under, for whom I am signing, during programs at the Facility or while at the Facility for any other reason, whether on or off the ice. I acknowledge that ice skating and other physical activities at the Facility involve risk of serious bodily injury. I fully accept and assume all risks and all responsibility for all losses and damages incurred as a result of my participation and my children's participation in these activities. I have read the Rules of the Stamford Twin Rinks and the Conduct of Skaters/Rules for Figure Skating Sessions of the Springdale Figure Skating Club and will abide by them. I have explained the Rules to my children. I agree that the staff of the Club or Facility may require the withdrawal from any session of any skater who violates the Rules.

Signature of Applicant _____ *Date* _____

Signature of Parent or Legal Guardian _____
 (if applicant is under 18)

For office use: *Date received* _____ *Entered on attendance sheets* _____



Special Figure Skating Sessions:

SUBSCRIPTIONS & SCHEDULE

June 22 - 27, 2009 and August 31 - September 5, 2009

Only Skating School or Skating Camp participants and skaters who have subscribed to 2009 Summer Individual Figure Skating sessions, may subscribe to a minimum of any 5 sessions per week.

All others must pay walk-on price.

Figure skaters may not practice figure skating moves (jumps, spins, MIF, dance patterns, programs, etc.) or schedule lessons on public skating sessions.

Name _____ Home Phone _____

Address _____ City _____ State _____ Zip _____

E-Mail Address _____

June 22 - 27, 2009

Choose a minimum of any 5 sessions to qualify for subscription price.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<input type="checkbox"/> 8-8:50 am	<input type="checkbox"/> 8-8:50 am	<input type="checkbox"/> 8-8:50 am	<input type="checkbox"/> 8-8:50 am	<input type="checkbox"/> 8-8:50 am	<input type="checkbox"/> 8-8:50 am
<input type="checkbox"/> 9-9:50 am	<input type="checkbox"/> 9-9:50 am	<input type="checkbox"/> 9-9:50 am	<input type="checkbox"/> 9-9:50 am	<input type="checkbox"/> 9-9:50 am	<input type="checkbox"/> 9-9:50 am
<input type="checkbox"/> 10-10:50 am	Camp Group Lessons	Camp Group Lessons	Camp Group Lessons	<input type="checkbox"/> 10-10:50 am	<input type="checkbox"/> 10-10:50 am
<input type="checkbox"/> 11-11:50 am	<input type="checkbox"/> 11:30-12:20 pm	<input type="checkbox"/> 11:30-12:20 pm	<input type="checkbox"/> 11:30-12:20pm	<input type="checkbox"/> 11-11:50 am	
<input type="checkbox"/> 12-12:50 pm	<input type="checkbox"/> 12:30-1:20 pm	<input type="checkbox"/> 12:30-1:20 pm	<input type="checkbox"/> 12:30-1:20 pm	<input type="checkbox"/> 12-12:50 pm	

Total # of sessions subscribed _____ x \$13 \$ _____

August 31 - September 5, 2009

Choose a minimum of any 5 sessions to qualify for subscription price.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<input type="checkbox"/> 2-2:50 pm	<input type="checkbox"/> 2-2:50 pm	<input type="checkbox"/> 2-2:50 pm	<input type="checkbox"/> 2-2:50 pm	<input type="checkbox"/> 2-2:50 pm	<input type="checkbox"/> 8-8:50 am
<input type="checkbox"/> 3-3:50 pm	<input type="checkbox"/> 3-3:50 pm	<input type="checkbox"/> 3-3:50 pm	<input type="checkbox"/> 3-3:50 pm	<input type="checkbox"/> 3-3:50 pm	<input type="checkbox"/> 9-9:50 am
<input type="checkbox"/> 4-4:50 pm	<input type="checkbox"/> 4-4:50 pm	<input type="checkbox"/> 4-4:50 pm	<input type="checkbox"/> 4-4:50 pm	<input type="checkbox"/> 4-4:50 pm	<input type="checkbox"/> 10-10:50 am

Total # of sessions subscribed _____ x \$13 \$ _____

Walk-ons: \$18 per session

Cash Check Visa Mastercard Credit card # _____ Exp. Date _____

Cardholder's Signature _____ Date _____ Check payable: Stamford Twin Rinks

Return with full payment in person or by mail to: Stamford Twin Rinks, 1063 Hope Street, Stamford, CT 06907

www.SpringdaleFSC.org

(203) 968-9000, ext. 4
FAX: (203) 321-1522

www.StamfordTwinRinks.com

PLEASE SIGN WAIVER ON OTHER SIDE

Waiver of Liability

I agree to waive liability and release any and all claims against RivCan Associates, owner ("Owner") of Stamford Twin Rinks (the "Facility"), its owners, Springdale Figure Skating Club, its members, and all of their officers, employees and agents and the Springdale Ballet Academy for injuries and damages suffered by myself or my children 18 or under, for whom I am signing, during programs at the Facility or while at the Facility for any other reason, whether on or off the ice. I acknowledge that ice skating and other physical activities at the Facility involve risk of serious bodily injury. I fully accept and assume all risks and all responsibility for all losses and damages incurred as a result of my participation and my children's participation in these activities. I have read the Rules of the Stamford Twin Rinks and the Conduct of Skaters/Rules for Figure Skating Sessions of the Springdale Figure Skating Club and will abide by them. I have explained the Rules to my children. I agree that the staff of the Club or Facility may require the withdrawal from any session of any skater who violates the Rules.

Signature of
Applicant _____ Date _____

Signature of Parent or Legal
Guardian _____
(if applicant is under 18)

For office use:

Date received _____

Entered on attendance sheets _____