

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**

14th Annual Summer Figure Skating & Ballet School

June 21 - August 28, 2010

(Plus, Figure Skating Add-on: Aug. 30 - Sept. 4)

The Facility:

- ♦ Two ice sheets (200' x 85')
- ♦ Jumping harness
- ♦ Digital sound system
- ♦ Professional skate sharpening
- ♦ Mirrored dance studio
- ♦ Aerobic & strength training studios
- ♦ Skyliners "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
- ♦ Karen Christensen
- ♦ Deborah Foll
- ♦ Lauren Finn
- ♦ Susan Marie Hamel-Bottari
- ♦ Frances Gold Lind
- ♦ Larissa Lomonosova
- ♦ Laura Longo
- ♦ Lea Ann Miller
- ♦ Yalin Murdock
- ♦ Caitlin Roberts
- ♦ Marina Spagnuolo
- ♦ Janet Thompson
- ♦ Rebecca Werdelin
- ♦ Marie Morrow, Ballet/Dance
- ♦ Caitlin Roberts, Ballet/Dance
- ♦ Todd Murray, Fitness

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 5 *daily sessions* offered Monday - Saturday and *save!* (Minimum number of sessions required for subscriptions.) 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 (10 wks): June 21 - Aug. 27

1st Half Season (5 wks): June 21 - July 23 **2nd Half Season (5 wks):** July 26 - Aug. 27
(No Skating on Friday, June 25)

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

Weekly One (1) each of the following dance & off-ice classes:
Hip Hop; Musical Theatre; Fitness; Stretch & Strength;
Ballet

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 and 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 (10 wks): June 21 - Aug. 28

1st Half Season (5 wks): June 21 - July 24 **2nd Half Season (5 wks):** July 26 - Aug. 28
(No Skating June 25 & 26)

- ♦ Single sessions available on subscription basis.
- ♦ **Minimum requirements for subscription price:** Choose any *20 sessions* per half season (1st or 2nd); any *30 sessions* for full season.
- ♦ Want to add to initial subscription? Choose additional sessions, (*minimum of 20 each time you sign up*) to qualify for subscription price.

SPRINGDALE BALLET & DANCE ACADEMY (Monday - Friday)

Full Season (10 wks): June 21 - Aug. 27

1st Half Season (5 wks): June 21 - July 23 **2nd Half Season (5 wks):** July 26 - Aug. 27
(No classes June 25)

- ♦ Available as part of Summer Figure Skating School *or as independent program.*
See attached schedule of classes and registration form.
- ♦ 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 21 - August 28, 2010

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 Jazz 6-7 yrs.		9:00-9:45 am Ballet 6-7 yrs.	
		10:00-10:45 am Pre-Ballet 3-5 years		10:00-10:50 am Ballet all ages, intermediate	
		11:00-11:45 am Jazz 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 Musical Theatre 8-11 yrs.	9:00-9:45 am Fitness 4 Kids 8-11 yrs.	9:00-9:45 am Stretch & Strength 8-11 yrs.
10:00-10:50 am Hip Hop all ages, intermediate	10:00-10:50 am Musical Theatre all ages, intermediate	10:00-10:50 am Fitness all ages	10:00-10:50 am Stretch & Strength all ages
11:00-11:45 am Hip Hop 6-7 yrs.	11:00-11:45 am Musical Theatre 6-7 yrs.	11:00-11:45 am Fitness 4 Kids 6-7 yrs.	11:00-11:45 am Stretch & Strength 6-7 yrs.

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

"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!

2010 SUMMER PROGRAM REGISTRATION FORM

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

Personal information:

Name _____ Age ____ Birthdate ____/____/____
 Address _____
 City _____ State _____ Zip _____
 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

(No Skating on Friday, June 25)

Season choice (check one):	Daily ice sessions (check one) and Fees:	Amount due:	
<input type="checkbox"/> Full season (10 wks)	<input type="checkbox"/> One (\$1,260)	<input type="checkbox"/> Two (\$1,665)	\$ _____
<input type="checkbox"/> 1st Half Season (5 wks)	<input type="checkbox"/> One (\$ 780)	<input type="checkbox"/> Two (\$1,008)	\$ _____
<input type="checkbox"/> 2nd Half Season (5 wks)	<input type="checkbox"/> One (\$ 810)	<input type="checkbox"/> Two (\$1,050)	\$ _____
<input type="checkbox"/> Single weeks (6/28-8/28)	<input type="checkbox"/> One (\$ 195)	<input type="checkbox"/> Two (\$ 260)	\$ _____
<input type="checkbox"/> Single week (6/21-24)	<input type="checkbox"/> One (\$ 156)	<input type="checkbox"/> Two (\$ 208)	\$ _____

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

Single week choices (if applicable): 6/21 6/28 7/5 7/12 7/19 7/26 8/2 8/9 8/16 8/23

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 1st Half or 2nd Half** from the attached Figure Skating Schedule. Summer Figure Skating School students receive preference for choice of sessions.

Full Season (10 wks.) 1st Half Season (5 wks.) 2nd Half Season (5 wks.)

Tell us the exact days & starting times for your session choices for each week. For example, put "6/22- 7 & 8, 6/24- 9, 6/28, 29, 30, 11:30 & 1:30, 7/3, 8 & 9, etc." until you have chosen the 20 session minimum requirement for each Half Season or 30 session minimum requirement for Full Season.

6/21-24 (no Fri/Sat) _____	7/26-31 _____
6/28-7/3 _____	8/2-7 _____
7/5-10 _____	8/9-14 _____
7/12-17 _____	8/16-21 _____
7/19-24 _____	8/23-28 _____

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

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

Paying in full before June 1, 2010? Deduct 5% of amount due! \$ _____

Balance due (by June 1, 2010; discount applies to balance only) \$ _____

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

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

2010 SUMMER PROGRAM REGISTRATION FORM

SPRINGDALE BALLET AND DANCE ACADEMY SUBSCRIPTIONS

(No Classes on Friday, June 25)

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 (10 wks)	\$117	x _____	\$ _____
<input type="checkbox"/> 1st Half Season (5 wks)	\$ 75	x _____	\$ _____
<input type="checkbox"/> 2nd Half Season (5 wks)	\$ 75	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, 2010? 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 6/1/10, less 15% service charge. No refunds or discounts after 6/1/10.

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 _____

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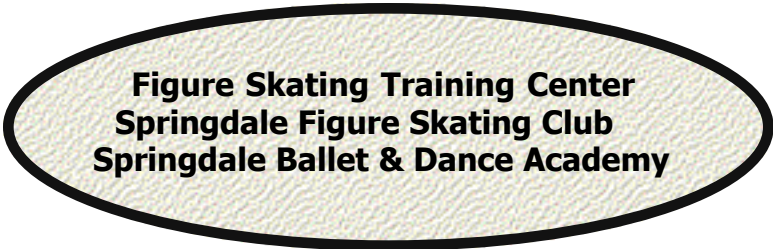
1063 Hope Street

Stamford, CT 06907

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Special Figure Skating Sessions:

SUBSCRIPTIONS & SCHEDULE
August 30 - September 4, 2010

Only Skating School or Skating Camp participants and skaters who have subscribed to 2010 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 _____

August 30 - September 4, 2010

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

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<input type="checkbox"/> 1:30-2:20 pm	<input type="checkbox"/> 1:30-2:20 pm	<input type="checkbox"/> 1:30-2:20 pm	<input type="checkbox"/> 1:30-2:20 pm	<input type="checkbox"/> 1:30-2:20 pm	<input type="checkbox"/> 8-8:50 am
<input type="checkbox"/> 2:30-3:20 pm	<input type="checkbox"/> 2:30-3:20 pm	<input type="checkbox"/> 2:30-3:20 pm	<input type="checkbox"/> 2:30-3:20 pm	<input type="checkbox"/> 2:30-3:20 pm	<input type="checkbox"/> 9-9:50 am
<input type="checkbox"/> 3:30-4:20 pm	<input type="checkbox"/> 3:30-4:20 pm	<input type="checkbox"/> 3:30-4:20 pm	<input type="checkbox"/> 3:30-4:20 pm	<input type="checkbox"/> 3:30-4:20 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. 16

www.StamfordTwin Rinks.com

FAX: (203) 321-1522

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 _____