



LEARN TO SKATE

8 Week Winter Session - \$140 Wednesday, Saturday, or Sunday



DATES & SCHEDULE

Wednesdays: February 3 to April 7
(No Class 2/17 and 3/31)
4:30 pm — 5:30 pm
5:00 pm — 6:00 pm

Saturdays: February 6 to April 10
(No Class 2/13 and 4/3)
1:00 pm — 2:00 pm

Sundays: February 7 to April 11
(No Class 2/14 and 4/4)
1:00 pm — 2:00 pm

Times subject to change

Program Includes:

- A 30 min lesson on your assigned day and time with a 30 minute practice
- **FACE MASKS REQUIRED UPON ENTRY**
- We **require** all students wear helmets and gloves/mittens
- Skate rental included
- Learn to Skate USA certified and insured instructors
- All schedules are subject to change
- Testing will take place on the last week of lessons
- Classes close out after week 3, space is limited
- 5-6 students per group class

NO make-ups or refunds



Basic Skills Information

Snow Plow Sam Levels (3-5 years old)

~Basic beginner skills for first-timers

Basic 1 - 8 (6 years and older)

~Students begin to learn basic skills in an appropriate age group. As they pass each level, the skills will become more advanced. Students must fulfill the requirements of the Learn to Skate USA Basic Skills Program in order to pass to the next level.

Pre-Hockey (10 and under)

~ Skating lessons for the future hockey player. Prerequisite- Must have Basic skills 1-3 to be placed in Coach AI Pre-hockey. We have beginner Pre-hockey basic skills for ages 6 and up.



Any questions can be directed to our LTS Director, Renee Siano: Renee@SuperiorIceRink.com | 631-269-3900

2021 Winter LTS REGISTRATION

Student Name: _____ Age: _____ Student DOB: ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

New: _____ Returning: _____ Highest Badge Passed: Snow Plow Sam _____ Basic _____ PH _____

Home: _____ Cell: _____

Email: _____ Parent Name: _____

PLEASE CHECK DESIRED DAY

- _____ Wednesday 5:00 PM —6:00 PM
- _____ Saturday 1:00PM—2:00 PM
- _____ Sunday 1:00 PM —2:00 PM

OFFICE USE ONLY

Method of Payment :

(Make all checks payable to Superior Ice Rink)

Check # _____ Cash _____ CC _____

AMT: _____ DATE: _____ MGR: _____