



White Rock South Surrey Skating Club

Carnival 2009

Fantasy On Ice

Skater Registration Form

Skater Name _____
 Parent Names _____
 Phone Number _____
 Email Address _____
 Skater Height _____ Weight _____ Age _____
 Clothing Size _____ Gender M or F
(Sizing will be adjusted closer to Carnival date)

Select your skating & participation level:

CanSkate	One group number	<input type="checkbox"/> \$50
CanSkate Tots	One group number	<input type="checkbox"/> \$50
CanPowerSkate	One group number	<input type="checkbox"/> \$50
Accelerated STARSkate	One group number	<input type="checkbox"/> \$50
STARSkate/Competitive	Two numbers	<input type="checkbox"/> \$95

Carnival relies on the volunteer efforts of **all** of our club members. Please indicate how you would prefer to help with Carnival 2009:

- | | |
|-----------------------------|----------------------------------|
| _____ Carnival Committee | _____ Spotlights |
| _____ Costume Coordinator | _____ Ice Captain |
| _____ Group Parent Rep | _____ Dressing Room |
| _____ Arena Set-Up | _____ Program Design |
| _____ Security | _____ Program Advertising |
| _____ Fundraising | _____ Program Sales |
| _____ Make-Up | _____ Publicity |
| _____ Set Painting & Design | _____ Lobby Decoration |
| _____ Ticket Sales | _____ Arena Take-Down & Clean-Up |
| _____ Photo Day | _____ Wherever I'm most needed |

Please complete fully & include Carnival fee with program registration.