



2023-2024 LEARN TO SPEEDSKATE

LOVE TO SKATE FAST? YOUTH (AGES 6+) AND ADULTS ARE INVITED TO PARTICIPATE IN THIS ENTRY-LEVEL SPEED SKATING PROGRAM. LEARN PROPER SKATING TECHNIQUES AND HAVE FUN! **SKATERS MUST BE ABLE TO SKATE INDEPENDENTLY.** EXPERIENCED COACHES.

SKATE PICK UP & INFO @ 5:30 PM NOV 14 (SESSION 1 & 2); JAN 4 (SESSION 3)

SKATES AVAILABLE TO RENT THROUGH GREATER MN SPEEDSKATING (+\$\$)

TUES & THURS, 5:30 - 6:30 PM

9101.146= SESSION 1 (FULL): NOV 16 - FEB 15

9101.147= SESSION 2 (1ST HALF): NOV 16 - DEC 21


9101.148= SESSION 3 (2ND HALF): JAN 9 - FEB 15

FULL SESSION: REG (NON-RES)= \$140, RV RESIDENT= \$130

FIRST HALF SESSION: REG (NON-RES)= \$80, RV RESIDENT= \$70

SECOND HALF SESSION: REG (NON-RES)= \$90, RV RESIDENT= \$80

REGISTER ONLINE @ WWW.CITYOFROSEVILLE.COM/SKATINGCENTER

Participants Name:		Phone:		
Home Address:		City:	State: Zip:	
	BIRTHDATE: _____			
	Skating Experience (circle one): <u>speedskating</u> <u>hockey</u> <u>skate without assistance</u>			
	GENDER (circle one): <u>F</u> <u>M</u>	PROGRAM #: _____	PROGRAM NAME: <u>Novice Speedskating</u>	
	Does participant have any disability, allergy or special needs of which we should be aware? _____ Explain: _____			
	<p>Liability Waiver: I understand that participation in this activity is completely voluntary. I recognize that there are risks in my participation in this activity. I agree to accept those risks. I also agree, in consideration for my being allowed to participate in this activity, and on behalf of myself, my heir, executors, administrators and assigns, to release and discharge the City or Roseville, sponsor (s) of the event or activity, and their officers, employees, agents, successors and/or assigns from liability for any and all injury, damage or loss that is or may arise from my participation in this activity.</p> <p>Data Practices Act Notice: Pursuant to the Minnesota Government Data Practices Act, you are being requested to furnish certain information that is classified as private under the Act. The City collects such information in order to properly process requests to participate in activities. You may refuse to provide such information, but such a refusal may affect your ability to participate. The information will be maintained by the City Park and Recreation Department, and may be accessible to anyone in the Department, or in other Departments of the City.</p>			
Signature:		Date:	E-Mail:	
Fee Paid:	Date Paid:	Check #:	By:	
Visa or MasterCard #:		CCV #:	Exp Date:	

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