



## Hockey Skating Technique

Do you have a hockey player that loves practicing stick & puck drills but needs to work on his or her skating technique? If your answer is yes then we have a class for you.

- Does your hockey player get the most out of each stride?
- Can your hockey player do crossovers forward and backward with power?
- Can your hockey player stop using either foot, using both edges, forward and backward?
- Can your hockey player make turns 5 different ways?
- Does your player understand how to balance over their blades for ultimate stability on the ice?

Registration on Sunday's January 24<sup>th</sup> & 31<sup>st</sup>, February 7th 1:50pm–3pm  
 and on Monday's January 25, February 1<sup>st</sup> & 8th 4pm–5pm  
 Please register early so we can set up the classes and have a smooth first day

At Haynes Pavilion, Gallatin County Fairgrounds

**Sunday's Class offered from 1:50pm - 3pm February 21<sup>st</sup> – April 25<sup>th</sup>**

**NO LESSONS MARCH 14<sup>TH</sup> and 29<sup>th</sup>**

**Classes includes 30 Minutes of Instruction and 30 Minutes of Practice Ice**

**New Low Price: \$100 for the 8 week session.**

For more information: Amy Malachowski at 581-1248 [www.bozemanfigureskating.org](http://www.bozemanfigureskating.org)

Registration: Make checks payable to Bozeman Figure Skating Club (BFSC).

Mail Registration to: **Bozeman FSC LTS Director, P.O. Box 3171, Bozeman, MT 59772**

Skater's Name \_\_\_\_\_

Skaters Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Previous Class /Level Passed \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parents Name \_\_\_\_\_ Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Sunday (\$100) \$ \_\_\_\_\_ Payment By: Cash \_\_\_\_\_ Check # \_\_\_\_\_

CC Proc Fee (+\$5) \$ \_\_\_\_\_ VISA \_\_\_\_\_ AMEX \_\_\_\_\_ MC \_\_\_\_\_ DC \_\_\_\_\_

**TOTAL** \$ \_\_\_\_\_ CC Expiration Date \_\_\_\_\_ CSV # \_\_\_\_\_

CC # \_\_\_\_\_

Name on Card \_\_\_\_\_

Address of Card \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_

Upon entering events sponsored by Bozeman Figure Skating Club (BFSC), I/We understand and appreciate that participation in, or observation of, the sports of ice hockey and figure skating constitutes risk to me/us of serious injury, including paralysis or death. I/we voluntarily and knowing accept and assume this risk, and release BFSC and LTS, their league affiliates, officers, sponsors, event organizers, skating facilities, coaches and officials from any liability and hold harmless therefore. I /We herby give my consent for an officer or coach of BFSC of LTS to obtain emergency medical treatment for my child in the event that I am not available.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_