

Learn to Skate



LTS Registration



1st skater: \$100/session, additional skater in family: \$85.

Registration includes:

- *six 45-min sessions
- 30-minute lesson -
- 15-minute practice
- *Free rental skates

There are classes available for all ages (3 year olds through adults) and skill levels.

NO Make-up classes. No refunds, exchanges, or credits for future sessions.

Make sure to wear long pants, long socks and gloves or mittens!

Upgraded professional skates
\$20/ session

We sell skates!

We sharpen skates!



Metro Ice Sports

5100 NW 72nd Street Urbandale,
IA 50322

Our Objectives

Teach the fundamentals of ice skating while building confidence and skills through each lesson.

Dates subject to change.

Session 1

Saturday 3:15-4:00pm
Sep.28; Oct.5,12,19,
Nov.2,9

Session 2

Saturday 3:15-4:00pm
Nov.16,23; Dec.7,14,21,28;

Session 3 (Winter)

Saturday 3:15-4:00pm
Jan. 4,11,18,25, Feb.1,8;

About the Program

A curriculum that offers something for everyone- from the first steps on the ice to mastering advanced techniques. Coaches will evaluate the skaters throughout the Session, testing on the 6th week. We prefer pre-registration on our website to help us schedule class sizes and coaches assignments. We are excited to offer our private lessons (Metro public skate) Sat.1:00-3:00pm to help our skaters progress. There lessons are intended for low and mid. level skaters.

www.dmfigureskating.com

Name: _____

Birthday: _____ Age: _____ Shoe size: _____

Skating Level: _____

E-Mail: _____

Address: _____ Phone: _____

Session #: _____

How did you hear about us? _____

Registration can be submitted online at <http://dmfigureskating.com>

(515) 490-5148 or forms can be mailed to: **Elena Tobiash**

3204 67th Street Urbandale, IA 50322

Email: iowafitureskating@gmail.com

Registration is also taken at the arena a half hour before class.

Payment can be made by cash, check or paypal.
(igorvelikanov@mail.ru) Please make checks payable to:

Elena Tobiash

LIABILITY AND PHOTO RELEASE WAIVER

I hereby release the, affiliates, professional staff, from any and all liabilities as a result of personal injury, which may be sustained by myself/ my child. In addition I hereby consent to and authorize to use any photographs and videos that have been taken of me and/or my child(ren) for the purpose of marketing and advertising of the Skate program. Such photographs will not have names listed.

Signature: _____ Date: _____

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