

**RSC Fun Day
Saturday March 25, 2017
Manotick Arena**

Name: _____

Level (Please circle): Pre Junior

Junior
Intermediate
Senior

Please complete parts A & B and sign and return to your coach by Friday March 10, 2016

A. TEAM ELEMENT EVENT * Will participate (please circle): Yes No

* All participating Club members will be divided into three teams; one level appropriate element will be performed by each team member.

B. INDIVIDUAL/ SMALL GROUP EVENTS - Please circle and indicate choice # (1st, 2nd or 3rd beside a maximum of three (3) events, in addition to the team event above. The 3rd choice for all skaters will be scheduled if time permits.

1) Individual Improv Showcase (CHOICE #)

Pre Junior - Circus	Junior - Disco	Intermediate - Jock Jams	Senior - Country
---------------------	----------------	--------------------------	------------------

2) Individual Showcase (CHOICE #)

Music Length: _____

3) Dance Showcase (CHOICE #)

Solo Dance	Family/Shadow/Partner Dance	
------------	-----------------------------	--

Partner(s) Name(s): _____

Music Title: _____

4) Group Unison Showcase (CHOICE #)

Pre Junior	Junior	Intermediate	Senior
------------	--------	--------------	--------

*Team Members: _____

* Please list all team members here

There will be a pot-luck of light refreshments available throughout the day, please indicate what you can bring :

snacks _____

(i.e. veggie tray, cheese, crackers, chips, cookies, squares, etc)

Waiver: The applicant (parent/guardian for skaters under the age of 18) acknowledges that certain risks are involved with a skating program/event that could result in injury. The applicant and parent/guardian hereby waive all claims, rights or causes of action against the Rideau Skating Club its officials, directors, coaches, or members, for personal injury or loss of property of any nature or kind, applicant however, or whenever sustained. The parent/guardian authorized the Rideau Skating Club to collect and use the personal data on this form to administer the programs for which the applicant has enrolled.

Signature of Parent or Guardian: _____

Volunteers are required to help us run this event. Please which activity below you are able to volunteer,

Ice Captain

Food Table

Dressing Rooms

Music & Announcing

*Volunteer Hours are available for any of these activities

Name of Volunteers:

Contact email:

Should you require any information please contact Heather Bousada at hebs@rogers.com