

**NEXXICE SYNCHRO CAMP REGISTRATION FORM - JULY 8th, 9th, 10th, 2016**

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| NAME: | | | | SKATER COACH | | | | | | | D.O.B. (d/m/y): | | | | | |
| ADDRESS: | | | | CITY: | | | | | | | | | | | | |
| PROVINCE/STATE: | | | | POSTAL/ZIP CODE: | | | | | | | | | | | | |
| HOME TELEPHONE: | | | | CELL: | | | | | | | | | | | | |
| EMAIL ADDRESS: | | | | | | | | | | | | | | | | |
| PARENTS NAME: | | | | CONTACT NUMBER: | | | | | | | | | | | | |
| EMAIL ADDRESS | | | | | | | | | | | | | | | | |
| EMERGENCY CONTACT: | | | | CONTACT NUMBER: | | | | | | | | | | | | |
| **SKATING INFORMATION**: | | | | | | | | | | | | | | | | |
| SKATE CANADA / USFSA #: | | | | | HOME CLUB: | | | | | | | | | | | |
| CURRENT SYNCHRO TEAM: | | | | | | | | | | | | | | | | |
| **T-SHIRT INFORMATION:** ALL PARTICPANTS WILL RECEIVE A T-SHIRT. PLEASE SELECT ONE OF THE FOLLOWING SIZES: | | | | | | | | | | | | | | | | |
| ADULT SIZES | X SMALL SMALL MEDIUM LARGE X LARGE | | | | | | | | | | | | | | | |  | |  |
| **SKATER FEES AND PAYMENT INFORMATION:** | | | | | | | | |  | | | | | | |
| **DAY CAMP** | | | | | | |  | | $550.00 | | | | YES: | | NO: |
| DAY CAMP INCLUDES ALL ON ICE SESSIONS WITH COACHES, OFF ICE TRAINING, LUNCH X 2, DINNER X 1 AND SNACKS | | | | | | | | | | | | | | | | |
| **RESIDENCE CAMP** | | | | | | $650.00 | | | | | | YES: | | | NO: | |
| RESIDENCE CAMP INCLUDES ALL ON ICE SESSIONS WITH COACHES, OFF ICE TRAINING, ACCOMODATIONS, BREAKFAST X 2, LUNCH X 2, DINNER X 2, SNACKS AND RETURN TRANSPORTION FROM HOTEL TO ARENA. | | | | | | | | | | | | | | | | |
| **COACH FEES AND PAYMENT INFORMATION:** | | | | | | | | | | | | | | | | |
| **DAY CAMP** | | | | | | | | $550.00 | | | | | YES: | | NO: | |
| **RESIDENCE CAMP** | | | | | | | | $650.00 | | | | | YES: | | NO: | |
| **WITH 5 OR MORE SKATERS ATTENDING** | | | | | | | | $350.00 | | | | | YES: | | NO: | |  |
| **HOTEL ACCOMODATIONS**: 4 PERSONS PER ROOM  ADDITIONAL COST FOR SINGLE OR DOUBLE ROOM. CONTACT US FOR INFORMATION ON RATES. | | | | | | | | | | | | | | | | |
| I PREFER: SINGLE ROOM: | | | DOUBLE ROOM: | | | | | | | | | | | | | |
| **PAYMENT METHOD:** (2.5% SERVICE FEE WILL BE ADDED TO ALL CREDIT CARD PAYMENTS) | | | | | | | | | | | | | | | | |
| CHEQUE (PAYABLE TO NEXXICE) | | | $ | | | | | | | # | | | | RECEIVED: | | |
| VISA # | | | EXPIRY DATE: | | | | | | | | | | | SECURITY CODE: | | |
| CARDHOLDER SIGNATURE | | | | | | | | | | | | | | RECEIVED: | | |
| MASTERCARD# | | EXPIRY DATE: | | | | | | | | | | | | SECURITY CODE: | | |  | | | | SIGNATURE: |
| CARDHOLDER SIGNATURE: | | | | | | | | | | | | | | RECEIVED: | | |
| **CLOSING DATE: JUNE 8TH, 2016** SEND COMPLETED REGISTRATION FORM TO: [nexxiceatbsc@yahoo.ca](mailto:nexxiceatbsc@yahoo.ca) | | | | | | | | | | | | | | | | |
| OR MAIL ALONG WITH PAYMENT TO: NEXXICE CAMP – 1201 APPLEBY LINE, BURLINGTON, ONTARIO, L7L 5H9 | | | | | | | | | | | | | | | | |
| REGISTRATIONS WILL BE CONFIRMED BY EMAIL & A FULL INFORMATION PACKAGE WILL BE SENT TO ALL PARTICIPANTS AT THAT TIME | | | | | | | | | | | | | | | | |