

**NEXXICE SYNCHRO CAMP REGISTRATION FORM - JULY 7th, 8th, 9th, 2017**

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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: (Please Print Clearly) | | | | | | | | | | | |
| PARENTS NAME: | | | | | | | CONTACT NUMBER: | | | | |
| EMAIL ADDRESS: (Please Print Clearly) | | | | | | | | | | | |
| EMERGENCY CONTACT: | | | | | | | CONTACT NUMBER: | | | | |
| SKATE CANADA / USFSA #: | | | | | | | HOME CLUB: | | | | |
| CURRENT SYNCHRO TEAM: | | | | | | | LEVEL: | | | | |
| **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:**  **ALL FEES MUST BE PAID IN CANADIAN DOLLARS** | | | | | |  | | | | | |
| **DAY CAMP** | | | |  | | $600.00 (CAD) | | | | YES: | NO: |
| DAY CAMP INCLUDES ALL ON ICE SESSIONS WITH COACHES, OFF ICE TRAINING, LUNCH X 2, DINNER X 1 AND SNACKS | | | | | | | | | | | |
| **RESIDENCE CAMP** | | | | | $700.00 (CAD) | | | | | 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** | | | | | $600.00 (CAD) | | | | | YES: | NO: |
| **RESIDENCE CAMP** | | | | | $700.00 (CAD) | | | | | YES: | NO: |
| **WITH 5 OR MORE SKATERS ATTENDING** | | | | | $400.00 (CAD) | | | | | YES: | NO: |  |
| **HOTEL ACCOMODATIONS**: 4 PERSONS PER ROOM  ADDITIONAL COST FOR SINGLE OR DOUBLE ROOM. CONTACT US FOR INFORMATION ON RATES. | | | | | | | | | | | |
| **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: JUNE1st, 2017** 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 | | | | | | | | | | | |
| **REFUNDS WILL NOT BE ISSUED AFTER JUNE 18TH, 2017** | | | | | | | | | | | |