

Comments: (things we should know about your child — disabilities, hobbies, special interests, shyness, etc.) _____

Other concerns: _____

What size shoe does your child currently wear? _____

Has your child skated before? _____

If so, where and what level has your child completed? _____

Proposed date of admission: _____

I understand and agree to all of the information provided.

Date: _____

Parent signature: _____

Parent signature: _____

PLEASE DO NOT FILL IN THIS SECTION

Date of admission to care: _____

Date of termination of care: _____