

DIVIDED BY LEVEL AND AGE, CLASSES RANGE FROM BEGINNER THROUGH ADVANCED FOR SKATERS AGE 4 THROUGH ADULT.

ON ICE INSTRUCTORS TEACH A PROGRESSION OF BASIC ICE SKATING SKILLS.

THIS THREE-WEEK SESSION INCLUDES:

- 1–30 MINUTE LESSON
- USE OF RENTAL SKATES
- PRACTICE CARD GOOD FOR 6 FREE PUBLIC SESSIONS
- BASIC SKILLS MEMBERSHIP CARD

**PREREQUISITE:**

ALL SKATERS MUST BE ABLE TO STAND AND WALK IN SKATES WITHOUT ASSISTANCE WHILE NOT ON ICE.

**MAKEUP CLASSES:**

IF A CLASS IS MISSED AND BODE IS NOTIFIED, CLASSES MAY BE MADE UP DURING THE SIX-WEEK SESSION.

THE LEARN TO SKATE PROGRAM IS SPONSORED BY THE ST. JOSEPH PARKS, RECREATION AND CIVIC FACILITIES DEPARTMENT.

SKILL LEVELS MAY BE COMBINED DUE TO LOW ENROLLMENT.

IN THE EVENT THAT THE ST. JOSEPH SCHOOL DISTRICT CANCELS CLASSES DUE TO **WINTER WEATHER**, THERE WILL NOT BE CLASS THAT EVENING. THE MISSED CLASS WILL BE MADE UP AT THE END OF THE THREE-WEEK SESSION.

AGES 4–ADULT

\$37.50 FOR THE THREE-WEEK SESSION

LEARN TO  
**SKATE**  
USA

# BODE SPORTS COMPLEX LEARN TO ICE SKATE



## LEARN TO SKATE USA

APRIL  
2024

BODE SPORTS COMPLEX  
2500 SW PARKWAY  
ST. JOSEPH, MO 64503

PLEASE CALL:  
(816) 271-5506 FOR ADDITIONAL  
INFORMATION

**PROGRAM DATES:**

**MONDAY EVENINGS 5:30–6:00PM**

**APRIL 8, 15, 22, 2024**

**THURSDAY EVENINGS 5:30–6:00PM**

**APRIL 11, 18, 25, 2024**

**\$37.50 FOR THE THREE-WEEK  
SKATE RENTAL  
INCLUDED IN PROGRAM FEE.  
SKATERS RECEIVES A PUNCH  
CARD—GOOD FOR SIX FREE  
PUBLIC SESSIONS.**

**REGISTRATION FORM**

NAME: \_\_\_\_\_  
(PLEASE PRINT NAME FOR CERTIFICATE PURPOSES)  
ADDRESS: \_\_\_\_\_  
CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: ( ) \_\_\_\_\_  
AGE: \_\_\_\_\_ D.O.B. \_\_\_\_\_  
E-MAIL: \_\_\_\_\_ FOR USFS PURPOSES ONLY.

GENDER: M \_\_\_\_\_ F \_\_\_\_\_

PAYMENT METHOD \$37.50 CASH \_\_\_\_\_ CHECK # \_\_\_\_\_ CC \_\_\_\_\_

**ACCIDENT WAIVER**

I UNDERSTAND THAT ICE SKATING & ACTIVITIES ASSOCIATED WITH THIS FORM OF RECREATION INCLUDES HAZARDS OF FALL, TRIPS & POTENTIAL HAZARDS ASSOCIATED WITH ACTIVITY ARE VIGOROUS AND DIFFICULT . WITH THAT UNDERSTANDING, I HEREBY WAIVE ALL CLAIMS FOR THE DAMAGES & NEGLIGENCE AGAINST THE CITY OF ST. JOSEPH, BODE SPORTS COMPLEX STAFF, IT'S EMPLOYEES, AGENTS & OR REPRESENTATIVES FROM ANY & ALL LIABILITY FOR ALL INJURIES WHICH I MIGHT SUFFER WHILE PARTICIPATION IN THIS ACTIVITY. I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR ANY INJURY WHICH MAY RESULT OTHER THAN ACTS OF NEGLIGENCE COMMITTED BY THE CITY OF ST. JOSEPH, BSC STAFF, IT'S AGENTS, EMPLOYEES & OR REPRESENTATIVES.

PARENT/PLAYER SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

