

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.

Each six-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 and Recreation 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 six-week session.

AGES 4–Adult

\$85.00 for the six-week session



Bode Sports Complex Learn to Ice Skate



Learn to Skate USA

February–March

2026

Bode Ice Arena is located @
2500 SW Parkway
St. Joseph, MO 64503

Program dates:

Monday Evenings

5:30–6:00pm

February 16, 23, 2026

March 2, 9, 16, 23, 2026

Thursday Evenings

5:30–6:00pm

February 19, 26, 2026

March 5, 12, 19, 26, 2026

\$85.00 for the six-weeks
skate rental
included in program fee.
Skaters receives a punch card—
good for six free
public sessions.

Registration Form

Name: _____

(Please Print Name)

Address: _____

City/State: _____ Zip: _____

Phone: (____) _____

Age: _____ D.O.B. _____

E-mail: _____ For USFS purposes only.

Gender: M _____ F _____

Payment method \$85.00_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: _____

