

****NEW****

Spring 2025

SKATE to PLAY

with

SUPERSKATE

(Tammy Coley, Edges P.S.I.)

5 Weeks through April & May

North Side Arenas

\$199 + GST

(See reverse for full schedule)

Skate to Play is a program for later starters, providing skating and hockey skills for ALL ages and ALL skill levels. We hope to foster confidence along with a love for skating and hockey. Our expert coaches can help you AND we'll have some fun along the way!!

Registration is simple, and we can also help with financial assistance, getting equipment, and navigating the process.

For more information, visit our website @

www.edgespsi.com

or email teryncoley@superskate.ca

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|-----------|-------------------------------|------------------|-------------------|
| Schedule: | Wed., April 2 nd | 5 – 6 p.m. | Castledowns Arena |
| | Wed., April 9 th | 5:15 – 6:15 p.m. | Clareview Arena |
| | Wed., April 16 th | 5 – 6 p.m. | Grand Trunk Arena |
| | Tues., April 22 nd | 4:15 – 5:15 p.m. | Grand Trunk Arena |
| | Wed., May 7 th | 4:15 – 5:15 p.m. | Clareview Arena |

HOW TO REGISTER

- 1) EMAIL this form, including full payment, to coleytr@telusplanet.net
- 2) MAIL/DELIVER registration form and full payment to
Edges P.S.I. 13017 – 137 A Street, Edmonton, AB, T5L 5A3

(NOTE: A confirmation email will be sent when registration is successfully processed. If you have not received a confirmation email, you are not registered and should contact us at coleytr@telusplanet.net)

NOTE: Registration will be taken on a first come, first serve basis and must include payment.

Registration Form

Skater Name: _____

Address: _____ City: _____ Postal Code: _____

Birthdate: _____ Phone: (H) _____ (other) _____
Month Day Year

Injuries or Health Concerns: _____ Health Care # _____

Email address: _____ Parent Name(s) _____

Previous skating experience (if any): _____

How did you find out about the class? _____

Payment:

Cheque/Money Order/Cash _____

Class Cost \$ _____

*Please make cheque or money order payable to
Edges P.S.I., 13017 - 137 A Street, Edmonton, AB, T5L 5A3*

GST (GST Reg. #88216 5723 RT0001) + _____

Visa _____ **Mastercard** _____

TOTAL = _____

Card # _____

Expires _____

Cardholder Name _____

Authorizing Signature _____

No refunds or credits will be issued unless program is cancelled by Superskate Advanced Hockey Development Association or Edges Professional Skating Instruction (Tammy Coley). Class times and dates are subject to City of Edmonton ice availability. In the event of arena closures, full non-expiring credits will be issued. In consideration of the benefits awarded to us by acceptance of this application, the undersigned agrees to save and hold harmless and release Superskate Advanced Hockey Development Association, Edges Professional Skating Instruction, Tammy Coley, all coaches and assistants, and any private or municipal rink of and from any and all claim rising from bodily injury and property damage sustained by the student. All skaters must wear CSA Approved helmets for Learn to Skate, full CSA Approved hockey equipment for all other classes, and must adhere to all other safety measures in place.

Date: _____ Signature: _____