

Evarts Rink THE HARVEY SCHOOL

240 Jay St. (Route 22), Katonah, NY 10536 (914) 232-3618

E-mail: evartsrink@harveyschool.org

Fall, Winter, and Spring 2018-2019 Figure Skating Program and Schedule

Wednesday Evenings	6:00 – 7:20 PM	Mixed Level	Price	
Spring Session	February 20 – June 26	19 weeks	\$ 361	
Saturday Mornings	8:00 – 9:00 AM 9:10 – 10:10 AM 10:20 – 11:20 AM	Mixed Level Mixed Level Mixed Level		
Fall Session	September 8 – November 24	12 weeks	\$ 168	
Winter Session	December 1 – March 30	18 weeks	\$ 252	
Spring Session	April 6 – June 22 (No ice April 13	11 weeks	\$ 154	

PLEASE NOTE:

- *HOLIDAY SESSIONS will be posted.
- *SEASON SUBSCRIBERS are guaranteed their place. Any available places will be offered on a first come first served basis. We will not over-subscribe sessions.
- *GUEST PROS Please notify us in advance when you wish to come and we will let you know how many places are available.
 - * Additional Ice Times may be available during the season. Please contact the rink.
- *<u>Times are subject to change</u>, please check with rink or on-line at <u>www.harveyschool.org</u>. Click on Evarts Rink.

Please send your child to the rink with the appropriate fees, or make arrangements with the front office for payment. We will not offer billing or carry balances.

*<u>ALL PROS</u> must give us a <u>current</u> Certificate of Insurance with the <u>Harvey School</u> listed as additional insured.

Walk-on Prices per session:

Wednesday Evenings & Saturday - Up to $\frac{1}{2}$ hour - $\frac{$12}{}$ / up to 1 hour - $\frac{$18}{}$ Wednesday Evenings only - Up to 1 hour 20 mins - $\frac{$24}{}$

THE HARVEY SCHOOL SKATING RINK Fall, Winter and Spring 2018 – 2019 Figure Skating Program Rates

Please circle type of program(s) desired:

Wednesday Ice:	Mixed	d Level					
6:00 – 7:20 PM					Spring:	\$361	
Saturday Ice:	Mixed	Mixed Level					
8:00 – 9:00 AM	Fall:	\$168	Winter:	\$252	Spring:	\$154	
9:10 – 10:10 AM	Fall:	\$168	Winter:	\$252	Spring:	\$154	
10:20 – 11:20 AM	Fall:	\$168	Winter:	\$252	Spring:	\$154	
		AMOUNT DUE:					
Skater's Name		Phone (Home)					
Street		Phone (work/cell)					
Town			State	_Zip	USFSA #	#	
Pro			Home Club	_Home ClubTest Level			
E-Mail: (Used to send out upon a control of the co	LEASE: As pactions, cause of such perms of neglige	tyle calenda parent/gua ses of action rson in this ence for inj	rdian or adult skate ons, damages to o program. I have ury and damages	er, I release ⁻ r by the unde read this rele sustained at	ersigned person for lease and understand	loss or injury resulting d this is a full release	
Applications calliot be proce							
Payment: CashC	heck(Made out	to: "The Harvey	School Rink	(") Ck/R#/CC#		
Credit	Card: MC	VISA	_ AMEX		Amount \$_		
CC#:				VV#			
Signature:			Exp. Da	ate/_			
Print Name:							