March-10 Request for skating sessions.

Skater's Name: ______________________ (Last name First Name) Date: ____________

Twenty dollar late fee for all requests received after due date **Return by:** Tuesday, February 23rd at 5:00 P.M.

Mark sessions you are requesting. (Double-click to select.)

Week 1		Week 2		Week 3		Week 4		Week 5		Week 6
1	$8.00	16	$3.00	35	$3.00	54	$3.00	73	$3.00	
2	$3.00	17	$8.00	36	$8.00	55	$8.00	74	$8.00	
3	$8.00	18	$3.00	37	$3.00	56	$3.00	75	$3.00	
4	$8.00	19	$8.00	38	$8.00	57	$8.00	76	$8.00	
5	$3.00	20	$8.00	39	$8.00	58	$8.00	77	$11.00	
6	$8.00	21	$3.00	40	$3.00	59	$3.00	78	$11.00	
7	$8.00	22	$8.00	41	$8.00	60	$8.00	79	$11.00	
8	$3.00	23	$8.00	42	$8.00	61	$8.00			
9	$8.00	24	$3.00	43	$3.00	62	$3.00			
10	$8.00	25	$8.00	44	$8.00	63	$8.00			
11	$3.00	26	$8.00	45	$8.00	64	$8.00			
12	$8.00	27	$3.00	46	$3.00	65	$3.00			
13	$8.00	28	$8.00	47	$8.00	66	$8.00			
14	$3.00	29	$8.00	48	$8.00	67	$8.00			
15	$8.00	30	$3.00	49	$3.00	68	$3.00			
		31	$8.00	50	$8.00	69	$8.00			
		32	$8.00	51	$8.00	70	$8.00			
		33	$3.00	52	$3.00	71	$3.00			
		34	$8.00	53	$8.00	72	$8.00			

1. Sessions ($ subtotal) = ______
2. Assoc Mem $1.00 fee per session = ______ (Suspended until further notice!)
3. Late Processing Fee $20.00 = ______
4. Non Member $2.00 fee per session = ______
5. Previous Bill / Past Due = ______ (Circle or specify!) ______
6. Credits = ______ (Subtract !!)

DUE WITH SIGN-UP $ Total = ______ (Sum of 3. to 6.)

Please place in **Price** folder or **mail to**: ***Lynn Nickel 204 Cory Lane Cottage Grove, WI 53527***

Lynn.Nickel@charter.net