



PSC Winter 2018 Contract (11 Weeks)

		1/1	1/8	1/15	1/22	1/29	2/5	2/12	2/19	2/26	3/5	3/12
MONDAY	4:00 - 5:00 pm			TBD					TBD			
	5:00 - 6:00 pm			TBD					TBD			
TUESDAY	4:00 - 5:00 pm											
	5:00 - 6:00 pm											
WEDNESDAY	4:00 - 6:00 pm	No Club Sessions, Consult City Website or PSC Website for City Free Session Schedule (Published Monthly)										
THURSDAY	4:00 - 5:00 pm											
	5:00 - 6:00 pm											
	6:10 - 6:40 pm											
FRIDAY	3:45 - 4:45 pm		TBD					TBD				TBD
	4:45 - 5:45 pm		TBD					TBD				TBD
SATURDAY	8:00 - 9:00 am		TBD					TBD				TBD
	9:00 - 10:00 am		TBD					TBD				TBD
SUNDAY	10:15 - 11:15 am		TBD					TBD				TBD
	11:15 - 12:15 pm		TBD					TBD				TBD
	5:00-6:00 pm		TBD	TBD				TBD		TBD		TBD

- Open FS** Designates PSC Club Ice - contract rates, coupon rates or walk-on rate \$15.
- CF** Designates City Free Ice, no contract available - rate \$10 per hour or punch card.
- IT** Designates PSC Interim Ice, no contract available - \$12 walk on, punch plus \$3.
- Jr.** Designates Jr. Blades session class.
- TBD** Designates times will be announced at a later date, check city website or PSC e-blast.
- Test** PSC Testing Session, no ice available, contact club for testing application.
- (W)** Walk-on rate and contract rate are the same for this session

Rate and Cost Calculation

		No. of sessions			Total
Ice Time	Clinics	Price			
		x \$12 ea.			
		x \$12 ea.			
Non-Contract Session					
		x \$12 ea.			
		x \$12 ea.			
		x \$6 ea.			(W)
		x \$12 ea.			
		x \$12 ea.			
		x \$12 ea.			
		x \$12 ea.			
		x \$15 ea.			(W)

Total Ice Sessions _____ Total Clinic Sessions _____

Total Cost Ice Sessions _____ Total Cost Clinic Sessions _____

PLEASE NOTE:

- ▶ **Contracting Requirements:** Must be a current home club or associate member to contract. Priority Order: Contracted, Home Club, Associate Member, guest walk-on, up rink capacity
- ▶ **Signing In:** All skaters must sign in with the monitor at the beginning of the session. Payment for session required prior to skating for all walk-ons.
- ▶ **Discounts:** 7.5% discount for 1 hrs ice sessions will be applicable to all contracts which equals or exceed 40 full, 1 hour ice sessions (average of 4 hours or more per week)
- ▶ **Contract Pricing Deadline:** Winter contract pricing effective until January 8, 2018. Regular walk-on rates apply to all sessions contracted after Jan. 8, \$15 per hour, \$8 per half hour.
- ▶ **Half Hour Sessions:** Half hour walk-on is permitted on most ice sessions, at the top or the bottom of the hour only (Sat - bottom only). Sessions splitting for contract sessions is generally not allowed.
- ▶ **Late Arrival:** Contracted skaters arriving more than 10 minutes late lose priority. Skater must leave ice at end of session.
- ▶ **Refunds:** PSC maintains its policy not to prorate sessions. There will be no retroactive refunds.
- ▶ **Make-up sessions:** Contracted skaters may switch up to a total of 16 sessions. Make-up sessions valid only for length of the contract; void after March 18.
- ▶ **Same Day Session Switch:** Same day session switches available, with loss of priority. Does not count as a make-up session.
- ▶ **Open FS -** Requires USFS Club level membership and passing Pre-Preliminary moves test, accompaniment by coach or prior authorization by PSC Pro-Chair or President.
- ▶ **Session Change:** If less than 12 skaters are contracted for a session, PSC reserves the right to cancel sessions, change levels or disciplines as needed.
- ▶ **Session Cancellation:** Occasionally circumstances require the cancellation of a session, a make-up session will generally be issued in such circumstances.
- ▶ **Liability Waiver:** Skating on all PSC Club sessions requires Liability Waiver Form and Lindsay's Law Form, completed within last 12 months.
- ▶ **Contacting PSC:** Email (pscluboffice@gmail.com) is PSC's typical form of communication. Please refer to our e-blasts for rink and ice updates. If you are not receiving our e-blasts, please contact the club office.

Sub-Total: _____

Discount (if >40 sessions):

(Total 1 hr. ice sessions x \$12 x .075) = _____

Contract Total: _____

1/2 of Total Due with Contract: _____

RETURN COMPLETED CONTRACT TO CLUB OFFICE OR MAIL TO: (Must be received by Jan 8, 2018)

Pavilion Skating Club of Cleveland Heights
1 Monticelo Blvd.
Cleveland Heights, OH 44118

Questions: pscluboffice@gmail.com

I agree to abide by the Pavilion Skating Club Constitution and By-Laws which govern all Club activities. I recognize my financial liability for the full season, and, hereby agree to pay all balances due for all the ice time contracted and reserved in my name, or in the name(s) of members of my family, or in the names of those for whom I am named guardian. I understand that accounts not paid up-to-date may result in test, contract and/or competition privileges being revoked. Refunds will not be issued for temporary illness or injury of less than 10 days, for which a skater is prohibited from skating by doctor's written excuse. Requests for refunds will only be considered as of the date the board receives written request.

Signed: _____
(Skater or Guardian if skater is under 18 years of age)

Print Name: _____
(Name of individual signing contract)

Phone Number: _____