2026 SPRING CHIPMUNKS

Skater Name: _____
Parent Name: _____
DOB: _____
Phone: _____
Email: _____
Address: _____
Postal Code: _____

CHOOSE YOUR CLASS & SESSION: (X)

BEGINNER **10:45-11:30am**	**FALL** **$262+hst**
ADVANCED **11:30am-12:15pm**	**$262+hst**

Cost: _____
HST: _____
Total: _____

CC#: _____
Expiry: _____

Program Info:
Sundays on the Studio ice
Sunday, April 26th - Sunday, June 21st 2026
9 week program

PRIOR SKATING EXPERIENCE IS REQUIRED.
****FULL HOCKEY EQUIPMENT IS REQUIRED. ONLY JERSEY WILL BE PROVIDED.***

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