2026-27 CIA FALL / WINTER CANSKATE FORM

Skater Name: _____

Parent Name: _____

DOB: _____

Phone: _____

Email: _____

Address: _____

Postal Code: _____

Skate Canada #: _____

CHOOSE YOUR LEVEL: (X)

Pre-Canskate (Age 3/4)	
Canskate (Age 5+)	

CHOOSE YOUR CLASS & SESSION: (X)

	FALL	WINTER	COMBO
Thursday 4:30-5:15pm	**$390+hst**	**$390+hst**	**$735+hst**
Friday 6:00-6:45pm	**$390+hst**	**$390+hst**	**$735+hst**
Sunday 10:20-11:05am	**$390+hst**	**$390+hst**	**$735+hst**

FALL 13 WEEKS (Thurs, Sept 24th - Sun, Dec 20th)
WINTER 13 WEEKS (Thurs, Jan 14th - Sun, April 11th)
COMBO 26 WEEKS

Cost: _____

Skate Canada/Admin Fee: $80.00

HST: _____

Total: _____

CC#: _____

Expiry: _____

905-625-7528

office@canadianiceacademy.com

NO Refund policy in place once program has begun

Refer to CIA Policies & Etiquette page for building policies

By submitting this form you are providing consent for Canadian Ice Academy staff to take and use photos and/or videos of on ice activities for promotional purposes (website,social media etc)