

**OFF ICE program, Summer Ice 2017**  
**Seniors**  
**Quinte Sports and Wellness Centre, Belleville**  
**WEEKS 4,5,6&7**

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Program includes complex of exercises from **Yoga, Pilates, Conditioning and Plyometric** and designed to speed up the progress on ice; to improve spins and spirals positions, to develop core strength, balance and flexibility, to develop specific strength, power and quickness for better jumps, to improve stamina and endurance for better performance overall, as well as to help to prevent injuries.

PROGRAM COACH: IRINA ARANOVSKAYA  
 Skate Canada Certified Coach,  
 MPE, University of Physical culture and Sport  
 First aid and CPA certified  
 Certified Yoga and Pilates teacher & Fitness instructor

Professional ice show artist  
 Former competitive skater (national and international level)  
 Trained in Olympic Figure Skating School, Russia  
**Program questions: Please contact Irina [irinaprosk8@gmail.com](mailto:irinaprosk8@gmail.com)**

**\*Please have your own yoga mat and dress appropriate \* Register early to avoid disappointment**

week 4	Tues, Aug. 1, 10:00-11:00 Yoga&Pilates	Thus, Aug, 3, 10:00-11:00 Conditioning&Plyometrics
week 5	Tues, Aug. 8, 10:00-11:00 Yoga&Pilates	Thus, Aug, 10, 10:00-11:00 Conditioning&Plyometrics
week 6	Tues, Aug. 15, 10:00-11:00 Yoga&Pilates	Thus, Aug, 17, 10:00-11:00 Conditioning&Plyometrics
week 7	Tues, Aug. 22, 10:00-11:00 Yoga&Pilates	Thus, Aug, 24, 10:00-11:00 Conditioning&Plyometrics

\_\_\_\_\_ TOTAL # of WEEKS ( if less then 4, please check in the box in front of desired week(s))

**FEES**

1 week	2 weeks	3 weeks	4 weeks
\$20.00	\$36.00	\$48.00	\$58.00

\*\*please circle # of WEEKS and applicable FEES

**PAYMENT POLICY**

Registration to be paid in FULL at time of registration with the submission of a completed form. The skater is not registered until payment is received in full. Please submit CASH, a Bank Draft or a CHEQUE post dated for June 30th, payable to SFSC. Please mail to: Stirling Figure Skating Club, P.O. Box 582, Stirling, Ontario, K0K3E0. No refunds are permitted unless a request is accompanied by a Doctor's note.

Total fee: CASH \_\_\_\_\_ Cheq.# \_\_\_\_\_ Cheq. amount \_\_\_\_\_

Skater's name		Coach	
Parent/Guardian name		Phone#, e-mail	

**Waiver:** The undersigned skater/parent/guardian hereby agree(s) to hold and save harmless the SFSC, all officers, directors, executive members, committee members and coaches from any claims for injuries, damage or loss of any kind whatsoever, however or whoever caused, and aforesaid jointly and severally are released by the undersigned from any and all such claims. The undersigned also agrees to abide by all Skate Canada and SFSC rules in effect, or as amended from time to time.

Signature of Skater (18 years of age or older)/Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_