



# 2016 Winter Camp Application

(PLEASE PRINT CLEARLY)

Skater's Name \_\_\_\_\_ Age \_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_ Male \_\_\_ Female \_\_\_

Parent/Guardian's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Phone#: Day (\_\_\_\_) \_\_\_\_\_ Night(\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone#: \_\_\_\_\_ Cellular: \_\_\_\_\_

List highest test passed: MOVES: \_\_\_\_\_ FREESTYLE: \_\_\_\_\_ PAIRS: \_\_\_\_\_ DANCE: \_\_\_\_\_

## Day Camp

10 Day Camp for \$1,100.00

Ice Castle's expert coaches and sport science professionals have developed a complete training package for you to better benefit from your training. The Package includes the following:

- Unlimited ice time - **Does not include private lessons.**
- 10 on-ice group lessons
- 10 off-ice group lessons
- Nutritious lunch daily
- Saturday Power Skating Class at \$35.00

## Daily Drop-In

\$150 per day

The package includes:

- Unlimited ice time - **Does not include private lessons.**
- On-ice group lesson
- Off-ice group lesson
- Nutritious lunch
- Saturday Power Skating Class at \$35.00

(Check off what day you are attending)

- Wednesday December 28

- Thursday December 29

- Friday December 30

- Saturday December 31

- Sunday January 1

-Monday January 2

-Tuesday January 3

-Wednesday January 4

-Thursday January 5

-Friday January 6

# 2016 Winter Camp Application: Continued

(PLEASE PRINT CLEARLY)

**POWER SKATING CLASS:** 45 minute power skating class Saturday  
Number of \_\_\_\_\_ X \$35.00/day =POWER SKATING TOTAL: \$ \_\_\_\_\_

**PRIVATE LESSONS:** All lessons are **20 minutes per lesson**. Lesson fees are listed in the brochure. Payment is made directly to each individual coach upon confirmation. **Indicate your preference for coaches numerically (1, 2, 3 etc.) in the space in front of that coach.** Indicate number of weekly lessons requested in the space and number of weeks attending. **If you are requesting more than one coach place number of coaches here:** \_\_\_\_\_.

_____ *Anthony Liu: (freestyle, jump technique)	_____ lessons per week x _____ weeks
_____ *Evelyn Kramer: (freestyle, spin technique)	_____ lessons per week x _____ weeks
_____ *Ikaika Young: (ice dance, skating & power skills, freestyle)	_____ lessons per week x _____ weeks
_____ *Dani Li: (freestyle, choreography, spins)	_____ lessons per week x _____ weeks
_____ *Gary Kemp: (choreography, freestyle, spins)	_____ lessons per week x _____ weeks
_____ *Sofia Inthalaksa: (freestyle, choreography)	_____ lessons per week x _____ weeks
_____ *Walter Stevenson: (freestyle)	_____ lessons per week x _____ weeks
_____ *Scott Driscoll: (freestyle)	_____ lessons per week x _____ weeks

## **Grand Total: DUE IN FULL BEFORE ARRIVAL. NO REFUNDS OR CREDITS.**

(Check off package attending)

Day Camp Package \$ 1,100.00

Daily Drop-In Package \$ 150.00

Power Skating Total \$ \_\_\_\_\_

Power Skating Total \$ \_\_\_\_\_

PSP Airport \$50 one way \$ \_\_\_\_\_

PSP Airport \$50.00 one way \$ \_\_\_\_\_

LAX AIRPORT \$200 one way \$ \_\_\_\_\_

LAX Airport \$200.00 one way \$ \_\_\_\_\_

Processing Fee (non-refundable) \$ 100.00

Processing Fee (non-refundable) \$ 100.00

**GRAND TOTAL PAYMENT DUE IN FULL NOW \$ \_\_\_\_\_**

**PAYMENT INFORMATION:** ALL PAYMENTS MUST BE IN U.S. FUNDS. VISA OR MASTERCARD CREDIT CARD PAYMENTS - I hereby authorize Desert Ice Castle to charge the GRAND TOTAL upon receipt of application.

Print Name of Cardholder \_\_\_\_\_ Cardholder Signature \_\_\_\_\_

Visa or Mastercard Account# \_\_\_\_\_ Exp. Date \_\_\_\_\_ / \_\_\_\_\_

Three Digit Security Code (on back of card) \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

MAIL COMPLETED APPLICATION TO: Desert Ice Castle, 68-600 Perez Rd. Cathedral City, Ca 92234, USA OR FAX TO (760)324-0455.  
For additional information, call (760)324-0400, go online [deserticecastle.com](http://deserticecastle.com), or email: [camp@deserticecastle.com](mailto:camp@deserticecastle.com)