

MINI CLASS

Name _____

Date _____

Free Skate Level _____

Coach _____

Circle all weeks that you want for each class:

EXPRESSION ON ICE: 1 st choice time _____ 2 nd choice time _____

1 2 3 4 5 6 7 8 9 10

CIRCUIT TRAINING: 1 st choice time _____ 2 nd choice time _____

1 2 3 4 5 6 7 8 9 10

POSITIONS FOR SKATING: 1 st choice time _____ 2 nd choice time _____

1 2 3 4 5 6 7 8 9 10

PILATES/STRETCH: 1 st choice time _____ 2 nd choice time _____

1 2 3 4 5 6 7 8 9 10