

# Skating is Fun

## REGISTRATION OPTIONS:

You **MUST** register in advance.

Sign up options are:

Mailing in the application along with a check made out to

**City of Long Beach.**

By phone Monday through Friday  
9:00am-9:00pm with a credit card.

**(VISA or MASTERCARD only)**

516-705-7385 or

In person at the ice arena office  
Monday through Friday from 9:00am-  
9:00pm by cash check or credit.

## Skating Programs:

**Snowplow Sam & Basic 1-8**

**Adult 1-4 & Hockey 1-4**

**\*THERE ARE NO REFUNDS\***

If you cannot make a class, please  
let Roberta know at 516-705-7402.

We recommend for first time  
skaters, especially children ages  
4-6, that they take a short private  
lesson with our professional  
instructors as an orientation before  
committing to an 8 week program.

Private skating lessons are  
available by appointment, only.  
Please contact **Roberta our Skating  
Director at (516) 705-7402** or  
email at [rdunn@longbeachny.gov](mailto:rdunn@longbeachny.gov)

City of Long Beach



Ice Arena

*Please check website for  
our 2020 Public Schedule.*

*Also please always be  
aware of any last minute  
closures/cancellations &  
for any upcoming holiday  
schedules by checking our  
website & facebook.*

**Also check our website  
for our other programs:**

Spring Hockey Clinics

Adult Hockey Clinic

NYR Learn to Play

NYR Rookie League

NYR Girls Program

Long Beach  
Skating  
Academy

USFSA Basic Skills

2020 Spring

Learn to Skate USA



City of Long Beach Ice Arena

150 West Bay Drive

Long Beach, NY 11561

Phone: (516) 705-7385

Website:

[www.longbeachny.gov/icearena](http://www.longbeachny.gov/icearena)

E-Mail:

[icearena@longbeachny.gov](mailto:icearena@longbeachny.gov)

[rdunn@longbeachny.gov](mailto:rdunn@longbeachny.gov)

**BEGINNERS &  
TOTS *MUST*  
WEAR A HELMET**

This program is for ages 4 & up and is designed to teach beginners of all ages the basic and advanced techniques of skating. Such as forward, backwards and crossovers, while building balance and speed, whether it is figure, hockey or recreational skating.

**8 Week Program Fee: \$215 +**

**USFSA Membership Fee: \$17**

*USFSA Fee is good through July 1<sup>st</sup>, 2020*

*Fee includes skate rental & Public Session following the LTS session.*

***\*THERE ARE NO REFUNDS\****

- All classes are 30 minute lesson. Friday is shared ice with the public session.

**Helpful Tips**

- Arrive 30 minutes early for your first class. After that, arrive 15 minutes before each class.
- Dress in layers, warm loose fitting clothing, socks and gloves
- Classes may be combined or cancelled due to insufficient enrollment

**Learn to Skate Sessions  
March/April/May**

**Friday 4:30pm-5:00pm\***

\*Note this session is during our Public Session

March 20<sup>th</sup>, 27<sup>th</sup>

April 3<sup>rd</sup>, 17<sup>th</sup>, 24<sup>th</sup>

May 1<sup>st</sup>, 8<sup>th</sup> & 15<sup>th</sup>

**Saturday 12:45pm-1:15pm**

March 21<sup>st</sup>, 28<sup>th</sup>

April 4<sup>th</sup>, 18<sup>th</sup>, 25<sup>th</sup>

May 2<sup>nd</sup>, 9<sup>th</sup> & 16<sup>th</sup>

**Sunday 2:30pm-3:00pm**

March 22<sup>nd</sup>, 29<sup>th</sup>

April 5<sup>th</sup>, 19<sup>th</sup>, 26<sup>th</sup>

May 3<sup>rd</sup>, 10<sup>th</sup> & 17<sup>th</sup>



***Spring 2020 Application***

Child's Name: \_\_\_\_\_

Age: \_\_\_\_ Sex: \_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Parent(s): \_\_\_\_\_

Parent #: \_\_\_\_\_

Emergency Contact Name & Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Level: (Please Circle One)**

Never Skated: 0 - Unassisted: 2

Holding On: 1 - Backwards: 3

**Day: (Please Circle One)**

**Friday - Saturday - Sunday**

I am aware that ice skating and ice rinks involve certain inherent risks, dangers and hazards, which can result in serious injury or death. I hereby freely agree to assume and accept all known and unknown risks of injury arising out of ice skating activities and absolve the City of Long Beach and the LB Ice Arena of all liability. I fully understand that my child must abide by all the Rules & Regulations set forth by the Recreation Department AND further agree to explain to my child the Codes of Conduct set forth by the LB Recreation Department and will follow those rules that apply to me as a parent and spectator. I hereby authorize and give full consent to the City of Long Beach to use and or publish photographs or video in which my child may appear while participating in Recreation Programs and grant permission for publication or use of those images.

Parent Signature: \_\_\_\_\_

**For Office Use:** Payment Form

CASH CREDIT CHECK # \_\_\_\_\_

Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Cashier Print \_\_\_\_\_

Cashier Initial \_\_\_\_\_