November - January 2026

LEARN–TO–SKATE

Skate Great™

LARGEST BASIC SKILLS PROGRAM IN WESTERN NEW YORK, TOP 10 IN THE U.S.

Learn - To - Skate Boys & Girls Ages 3 thru Adult: Beginner - Advanced

Award Winning U.S.F.S. Basic Skills Program

Hockey Skating Skills

Endorsed by USA Hockey: **Taught with no sticks & pucks**

Pre-requisite skating skills- Basic 2

- **REGISTER ONLINE – WWW.SK8GR8.COM**
- **FREE Loaner Skates**
  (If needed, please arrive 30 min early on the first day)
- **45 Minute Session Includes: 30 min. lesson & 15 min. practice**
- **Children 6 & under are encouraged to wear an Ice Safe Helmet, bike helmets okay!**
- ***Year-Round Programs***

For Information contact:
Skate Great Office (716) 580-3458
WWW.SK8GR8.COM

LEISURE RINKS
75 Weiss Road
West Seneca, NY 14224

HOLIDAY TWIN RINKS
3465 Broadway
Cheektowaga, NY 14227

NOVEMBER - JANUARY SESSION

MONDAYS: Holiday Rinks 5:30-6:15
November 24, December 1, 8, 15, 22, January 5, 12, 19
**No Class November 27 & December 29*

TUESDAYS: Leisure Rinks 5:30 – 6:15
November 25, December 2, 9, 16, 23, January 6, 13, 20
**No Class December 30*

THURSDAYS: Leisure Rinks 5:15 – 6:00
November 20, December 4, 11, 18, January 8, 15, 22, 29
**No Class December 25 & January 1*

Registration Form – LTS Nov - Jan 2026

Skate Great™

www.sk8gr8.com/registration

_____
Skater's Name *Male/Female* *Birthdate*

_____
Address *City* *Zip*

_____ _____
****E-mail (discounts & email confirmation)*** *Phone* *Badge Level*

Mondays:	**_____Learn-to-Skate / _____ Hockey Skating Skills**	**5:30 – 6:15**	**8 weeks**	**Holiday Rinks**	**$120.00**
Tuesdays:	**_____Learn-to-Skate / _____Hockey Skating Skills**	**5:30 – 6:15**	**8 weeks**	**Leisure Rinks**	**$120.00**
Thursdays:	**_____Learn-to-Skate / _____Hockey Skating Skills**	**5:15 – 6:00**	**8 weeks**	**Leisure Rinks**	**$120.00**

_____Parent Participation *(Optional – Parents may skate the last 15 minutes of the session) Cost*: **$25 (Valid 7/1-6/30)**

Do you need rental skates? YES / NO **Shoe Size: _____** **Interested in private lessons? YES / NO**

Total amount paid: _____ **Check #_____** **Receipt #_____**

Please check if this box if you would like to receive text alerts for cancellations, updates, etc. ☐ Cell #_____

As a parent or guardian of this student, I hereby consent to the use of photographs/videotape taken during the session for publicity, promotional and/or educational purposes (including publications, presentation or broadcast via newspaper, internet, or other media sources). I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

___ Yes, I give consent for Skate Great to use photographs my child. ___ No, I do not authorize Skate Great to use any photographs of my child.

Parent Signature_____ Date: _____

Skate Great assumes no responsibility for any accident or injury to any participant. No Refunds / Exchanges. $50.00 fee for all returned checks.