

April-May 2026

LEARN-TO-SKATE



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

Learn - To - Skate

Hockey Skating Skills

Ages 3 thru Adult: Beginner - Advanced
Award Winning U.S.F.S. Basic Skills Program

Endorsed by USA Hockey: Taught with no sticks & pucks
Prerequisite 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 HOLIDAY TWIN RINKS
75 Weiss Road 3465 Broadway
West Seneca, NY 14224 Cheektowaga, NY 14227

APRIL SESSION

MONDAYS: Holiday Rinks 5:30-6:15
April 13, 20, 27, May 4, 11, 18

TUESDAYS: Leisure Rinks 5:30 – 6:15
April 21, 28, May 5, 12, 19, 26

THURSDAYS: Leisure Rinks 5:15 – 6:00
April 23, 30, May 7, 14, 21, 28

Registration Form –LTS April-May 2026



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	6 weeks	Holiday Rinks	\$90.00
Tuesdays:	___ Learn-to-Skate / ___ Hockey Skating Skills	5:30 – 6:15	6 weeks	Leisure Rinks	\$90.00
Thursdays:	___ Learn-to-Skate / ___ Hockey Skating Skills	5:15 – 6:00	6 weeks	Leisure Rinks	\$90.00
___ 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.