

2025-2026 - NEW PRAGUE AREA FIGURE SKATING CLUB
JUNIOR CLUB CONTRACT (2 Year Maximum)

SKATER NAME : _____

ICE OPTIONS

- Junior Club Sessions will run every Saturday, starting September 13th through March 14th
 - (excluding Nov. 1(Burnsville Competition), Dec. 27, & Jan. 17 (Mankato Competition))
- Sessions Fees include 30 minutes of contracted ice and coaching fees
- 30 minute lesson with program coach (Lessons will be mostly conducted in a group, with individual attention when appropriate)

| SELECT | NPAFSC ICE SESSION | SESSION TIME | # OF SESSIONS | FEE PER SESSION | SELECTED FEES |
|--------|----------------------------|----------------|---------------|------------------|---------------|
| | Saturday - Jr Club Session | 7:40 - 8:10 am | 24 Sessions | \$18 per session | \$432 |

USFSA & NPAFSC MEMBERSHIP

NPAFSC operates in conjunction with the US Figure Skating Association (USFSA) and membership to both organizations is required. USFSA fees are due, if not already renewed in June.

| SELECT | OPTIONS | SELECTED FEES |
|--------|--|---------------|
| | USFSA - Returning Members - I've already paid my renewal for the year | |
| | USFSA - New Members - I understand USFSA membership is required, and agree to pay the fee. | \$85 |
| | NPAFSC - 1st Year Members - NPAFSC Club Membership Fee is waived for all 1st year skaters | |
| | NPAFSC - Returning Members - NPAFSC Club Membership Fee is required | \$50 |

WINTER EXHIBITION

On December 13th, NPAFSC will host our Annual Winter Exhibition. Details pertaining to the Winter Exhibition will be emailed to all club members later this fall. Winter exhibition will be an opportunity for the Jr. Club members to skate a group number for family and guests. Please select one of the options below:

| SELECT | OPTIONS | SELECTED FEES |
|--------|--|---------------|
| | Yes, my skater plans to participate in the Winter Exhibition (\$30 per Skater) | \$30 |
| | My skater will not be participating in the Winter Exhibition | |

FUNDRAISING RESPONSIBILITIES

In order for NPAFSC to offset the cost of ice and other club activities, we require our members to participate in fundraising activities throughout the season.

- Each Jr Club Member needs to raise \$175 through Fundraising Activities, or you may select the “Buy-Out” option below.
- If the minimum fundraising requirement is not met, members will need to submit additional funds to meet the requirement.
- Any funds raised above \$175 commitment, 50% will go into the individual skater’s account to be used towards club events, clothing, or additional ice.

| SELECT | OPTIONS | SELECTED FEES |
|--------|--|---------------|
| | We will participate in fundraising to meet our fundraising obligations. (No Fees) | |
| | We elect to buy-out of our fundraising requirements and agree to pay the up-front buy-out fee. | \$175 |

| | |
|---|-----------|
| TOTAL FEES DUE: (include all Ice / Membership / Winter / Fundraising Selections) | \$ |
|---|-----------|

CONTRACT & PAYMENT INSTRUCTIONS

Payments should be made to New Prague Area Figure Skating Club (NPAFSC), and are due no later than Sept 13, 2025.

Contracts and Payments not received by the due date may result in your skater not being eligible to skate until they are received.

Drop-off locations (including dates / times) will be communicated via email. Please contact us directly with questions : npafsc@gmail.com

Please select which payment option you will be using:

- _____ - Full Payment up-front (check or ACH*)
- _____ - 3 Installments of 1/3 each : dated 9/13/25, 11/15/25 & 1/17/26 (ACH only*)

*If paying via ACH, please complete the ACH Authorization Agreement section below.

DUE TO OUR COMMITMENT TO THE COMMUNITY CENTER, ALL PAYMENTS ARE NON REFUNDABLE.

Parent Signature: _____ Email: _____

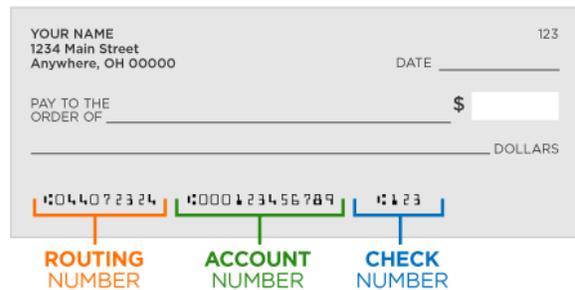
Date: _____

ACH DEBIT AUTHORIZATION AGREEMENT

Please complete the following Authorization Agreement, if you plan to leverage ACH capabilities in relation to the NPAFSC Ice Contract.

| | |
|---|--|
| Personal or Business Name | |
| Personal or Business Address (Street, City, State, Zip) | |
| Bank Name | |
| Bank Address (Street, City, State, Zip) | |
| Bank Routing Number | |
| Account Number | |
| Account Type | |
| Payment Frequency | <input type="checkbox"/> One Time (Full Payment) <input type="checkbox"/> 3 Installments of 1/3 each (9/13/25, 11/15/25 & 1/17/26) |

*** Please attach a voided check or savings deposit slip with your ACH Agreement



AUTHORIZATION & SIGNATURE

I, _____, authorize **New Prague Area Figure Skating Club** to initiate automatic debit entries to the account at the bank listed above. I authorize the initiation of credit entries, if necessary, to complete adjustments for any entries made in error to the account listed above. I acknowledge that the origination of ACH transactions to my account must comply with provisions of U.S. law.

This Authorization Agreement will remain in effect until I notify you in writing to cancel or change it, and in such time, as to afford the financial institution a reasonable opportunity to act on it. By signing this authorization, I hereby acknowledge receipt of a copy of this signed Authorization Agreement.

Signature of Account Holder: _____

Name (Print): _____

Date: _____