

## Directions to the NEW Forest Lake Sports Complex Arena

From I-35:  
Take Hwy 97 east 1 mile to Fenway Ave. N.  
Turn south / right on Fenway Ave. N.  
At 206<sup>th</sup> St. turn east / left.

From the Hwy 61:  
Take Hwy 97 west / right to Fenway Ave. N.  
Turn south / right on Fenway Ave. N.  
At 206<sup>th</sup> St. turn east / left.



### Please Note:

We ask that you do not sit in the penalty boxes, it is distracting to the instructor & skaters. We find it is better if you view your skater from the bleachers or warming area.

For an additional \$5 fee, immediate family members (of registered skaters only) will be allowed on the ice in the practice area during their skaters' time on the ice.

President- Ted Lichtscheidl  
Vice President- Becky Wodziak  
Secretary- Tami Bucholz

## ***WE offer:***

- 1. I.S.I. testing for all levels up to FS6.***
- 2. Learn to skate for beginner skaters.***
- 3. Qualified Instructors.***

**Registrations should be sent to:**

**Cutting Edge Skating Association (CESA)  
PO Box 503  
Forest Lake, MN. 55025  
Or register at a class!**

CESA Phone # 651.464.7622

Information is subject to change.



# Cutting Edge Skating Association

## 2009 Fall Session

The NEW Forest Lake Arena!  
Forest Lake Sports Complex  
5530 206<sup>th</sup> St. North  
Forest Lake, MN 55025

Email: [skatecesa@yahoo.com](mailto:skatecesa@yahoo.com)

**Funds used to print this flyer were provided by CESA. This is NOT an ISD #831 School District sponsored activity.**



**Recommended equipment:** figure or hockey style skates (double blade skates are not allowed), helmets and other protective gear are not required, but are highly recommended for tots. We suggest skaters dress in warm layered clothing, hats and mittens, snow pants are recommended for tots.

**Registration Procedure:** Classes will be filled on a "first-come, first-serve" basis until **January 6<sup>th</sup>**. Walk-ins and registrations received after the deadline will be taken as class size allows. **We will call you only if there is a need to add or change a class time.** No registrations will be accepted without full payment.

Send a completed registration form and a check made payable to: **Cutting Edge Skating Association (CESA)**  
P.O. Box 503, Forest Lake, MN 55025.

**CESA is a non-profit corporation to help promote ice-skating.**

NEW REGISTRATIONS ARE ALWAYS WELCOME!  
SKATERS MAY REGISTER AT ANY TIME!

**Saturday Morning 8 Sessions \$108.00**

*Starts January 9<sup>th</sup> 2010  
at the Forest Lake Sports Complex Arena*

**NOTE: CLASS TIMES VARY. PLEASE NOTE SPECIFIC CLASS SCHEDULES AT:**  
[cuttingedgeskating.com](http://cuttingedgeskating.com)

Class Schedule:

January 9, 2010	8:00 – 10:30 A.M.
January 16, 2010	8:15 – 10:45 A.M.
January 23, 2010	8:00 – 10:30 A.M.
January 30, 2010	8:30 – 11:00 A.M.
February 6, 2010	8:00 – 10:30 A.M.
February 13, 2010	8:00 – 10:30 A.M.
February 20, 2010	8:00 – 10:30 A.M.
February 27, 2010	8:15 – 10:45 A.M.

Classes are 30 minutes long with 30 minutes of practice time, before or after lessons.

**1<sup>st</sup> hour: Freestyle**

**2<sup>nd</sup> hour: Delta, Gamma, Beta – classes are before practice time.**

**2<sup>nd</sup> hour: Alpha and Pre-Alpha – practice is before lessons.**

**Tots: Practice is before lessons; lessons are always the last ½ hour.**

## Cutting Edge Skating Association

(Please Print Clearly)

Skater's Name: \_\_\_\_\_

Parent/Guardian Names/s: \_\_\_\_\_

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

Phone : ( ) \_\_\_\_\_

Emergency Phone : ( ) \_\_\_\_\_

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

Birthdate: \_\_\_\_\_ Gender: M F

Level: \_\_\_\_\_ Time: \_\_\_\_\_

Parent/Guardian Authorization:  
I hereby authorize the instructors, managers, and directors of the Cutting Edge Skating Association (CESA) to arrange for and consent to necessary medical treatment for my child in the event of an accident or injury when a parent or guardian is unavailable to give consent directly. I give my permission for my child to participate in the CESA program. I assume all risks and hazards of my child's participation in the CESA program. I understand that skating is an activity in which physical injuries may occur, and I agree not to hold CESA, its instructors, managers, directors, or skating arenas responsible for accidents.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

Relationship to child \_\_\_\_\_