

# PCFSC Program Assistance Application 2026-2027

Becoming a Canskate Program Assistance is a great way to fulfill your high school volunteer hours or earn a credit towards your skating fees. You **MUST** be 10 years old (unless approved by Canskate Coordinators). You can choose to take ALL your hours as volunteer hours or you can choose to exchange your hours for a credit on your next season's program registration. (\$5/hour as PA). *As per Skate Canada Regulations, if you decide to exchange your hours for credit, the first 20 hours qualify towards your club commitment and cannot be exchanged. It applies only once.*

**IT IS THE PA'S RESPONSIBILITY TO SIGN-IN EVERY TIME THEY ARE ON THE ICE.** The binder will be at the the top of the ramp by the music player.

Please complete the following form and return to Sarah or Meghan. If you have any questions or need to report an absence please reach out to [sr94av@yahoo.com](mailto:sr94av@yahoo.com)

Skater's Full Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Skate Canada # \_\_\_\_\_

Please answer to the following:

I am new to PA                      OR                      I have \_\_\_\_\_ years of experience

I would like to assist on the following sessions:

Please check ✓ the boxes you will be attending and write "S" for substitute possibilities.

|                         |  |                       |  |
|-------------------------|--|-----------------------|--|
| Sunday 10:40AM-12:10 PM |  | Thursday 6:10-7:10 PM |  |
| Tuesday 6:10- 7:10 PM   |  | Friday 6:05-7:05 PM   |  |

Please be aware, this is a **WEEKLY** commitment. Any absence should be reported to the Canskate Administrators for the session as soon as possible. **After 3 absences, PA's will be required to make up their hours. If hours are not made up, the opt out fee will be charged.**

Sign below to confirm your understanding of the commitment required to be a PA. Please also have your Parent/Guardian sign to confirm their understanding of the extra time required and their commitment to support you.

Skater Signature: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Board Representative: \_\_\_\_\_

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

Sweater Size: \_\_\_\_\_