



PRIVATE TUITION REQUEST FORM

Please and hand in private lesson slip to Arena Office.

Skaters Full Name: _____ Date of Birth: _____

Parents Name(s): _____

Contact Phone #'s: Daytime: _____ Evening: _____

Contact Phone #'s: Email Address: _____

Highest Kiwi Skate Badge: _____ Skate School Coach: _____

Number of Lesson's requested: _____

Preference for Days and time of Lesson(s) _____

Date of request: _____

Staff Name: _____

Avondale Ice Arena ~ 150 Lansford Crescent, Avondale, Auckland. PO Box 15266 New Lynn, Auckland
Phone: 828 3800 Fax: 828 4048, Email: info@paradice.co.nz

Botany Ice Arena ~ Corner of Ti Rakau Drive & Botany Road, Botany Downs, Auckland, PO Box 58907,
Green mount, Auckland. Phone: 273 2999 Fax: 274 5551