

SHARPER EDGE SKATING SCHOOL (mailing address only)
100 POWDERMILL RD- PMB 233
ACTON, MA 01720 (978) 369-0088



"LEARN TO SKATE" APPLICATION

Please print all Info:

Skater's Name: _____ DOB: _____

Address: _____ City: _____ Zip: _____

Age: _____ M/F Skating Level: _____ Phone: _____

Parents' Names: _____ / _____

Emergency Contact: _____ Emergency Phone: _____

Emergency Contact: _____ Phone: _____

PRINT EMAIL: _____

Summer Session 06/29/15 - 07/27/15

Registration fee: \$15.00 per child not to exceed \$30.00 per family. (Summer Rate)

Classes are subject to change due to enrollment.

Sorry, there are no refunds once the session starts.

Please Note: Your child will not be enrolled until a completed form and full payment are received. **Parents of minors should stay in the building during class.**

Monday 06/29/15 - 07/27/15	4:50-5:30PM	5 weeks	40 mins	\$95.00
Please check below what days you will be attending class.				
<input type="checkbox"/> 06/29 <input type="checkbox"/> 07/06 <input type="checkbox"/> 07/13 <input type="checkbox"/> 07/20 <input type="checkbox"/> 07/27				
_____ # of classes x \$19.00		Total:		
		Late fee: If payment received after 06/15/15		\$10.00
		Registration Fee (Summer Rate)		\$15.00
		TOTAL:		

CONFIRMATIONS WILL NOT BE SENT.

Applications due: June 15th, 2015

I hereby assume all risks and hazards incident to participation in any and all Sharper Edge Skating School activities. I hereby waive, release Sharper Edge Skating School, their professionals and employees of any harm and injury.

 Signature (Parent or Guardian if skater is under 18) Date: _____

Please send signed form and payment in full to the address written above by 06/15/15.
A \$10.00 late processing fee will be applied to all applications received after the due date.

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the SHARPER EDGE SKATING SCHOOL INC. athletic/sports program, related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce the risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE VALLEY SPORTS INC. and SHARPER EDGE SKATING SCHOOL, INC. their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person property, WHETHER ARISING FROM NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____ Date Signed: _____
 PARTICIPANT'S SIGNATURE

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in the programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE.

X _____
 Parent/Guardian's Signature Emergency Phone # (s)

Date Signed: _____

Additional Emergency Contact Info:

Name: _____ **Phone:** _____

Visit our website at: www.SharperEdgeSkating.com. Visit our website to see our new calendar for the session information.

