

ADULT INSTRUCTIONAL

PROGRAM AT THE RINKS AT SHELTON

WINTER 2017

9 SESSIONS FOR
ONLY \$199

SUNDAYS 8-9PM

(JAN 8- MAR 5)

*JAN 22 & JAN 29 8:30-9:30 PM

SPACE IS LIMITED, SIGN UP NOW!!

Required Equipment: Skates, Hockey Helmet and Stick
(knee/elbow pads recommended)



Winter 2017 Adult Instructional Registration

Payment in full must accompany registration

Name: _____ Date of Birth: ____ / ____ / ____ Gender: M / F

Address: _____ City: _____ State: _____ Zip: _____

Parent/Guardian: _____

Primary Phone #: _____ Secondary Phone #: _____

Email Address: _____

Sunday 8:00-9:00 pm

***Jan 22 & Jan 29 8:30**

Cost:

Of classes ____ x \$199 = \$ _____

Admin Fee: **\$10**

Total: \$ _____

Credit Card Information-

Name on Card: _____

Credit Card #: _____

Exp ____ / ____ 3 or 4 digit security code: _____

Visa/Mastercard/Discover/Amex are all accepted. In filling out this form, you authorize SportsCenter of Connecticut to charge the above amount.

The Rinks at Shelton ("Rinks") RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT PARTICIPANT PLEASE READ BEFORE SIGNING (Larger Type Copy available at Front Office).

In consideration of being allowed to participate in any way in any and all activities, leagues, clinics, events, skating programs at Rinks ("Program"), Participant, acknowledges and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis, disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. PARTICIPANT KNOWINGLY AND FREELY ASSUMES ALL SUCH RISKS, being both known and unknown of my participation in the Program EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. PARTICIPANT willingly agrees to comply with the stated and customary terms and conditions for participation in the Program, if however, PARTICIPANT observe any unusual significant hazard during my presence or participation, PARTICIPANT will remove myself from participation and bring such to the attention of the nearest official immediately, and,
4. PARTICIPANT, for myself and on the behalf of my heirs, assigns, personal representatives, next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS RINKS, 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 or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. Arbitration: In further consideration of allowing me to participate in the aforementioned Program, PARTICIPANT hereby agrees to submit to binding arbitration any and all claims which PARTICIPANT believes PARTICIPANT may have against Rinks arising from my activities at the Rinks. The arbitration shall be pursuant to the rules of the American Arbitration Association. The arbitration shall apply the Federal Rules of Evidence to all proceedings.
6. I hereby grant Rinks the right to use photographs, video images and/or other media of participant for publicity, advertising and/or other commercial purposes.
Arbitration shall be commenced within one (1) year from the date on which any alleged claim first arose. Furthermore, the arbitration shall be held in Shelton, Connecticut unless otherwise mutually agreed to by all parties. The submission to American Arbitration Association shall be unlimited and the arbitration award may be enforced by any court of competent jurisdiction.

PARTICIPANT HAS READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTANDS ITS TERMS, UNDERSTANDS THAT PARTICIPANT HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGNS IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 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 and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X _____ Date Signed: _____
Parent/Guardian or Participant Signature

* 10 minutes for ice resurfacing for each class. No Make-ups. Pro-rata refunds only if due to injury/major sickness (Doctor's note required) net of \$35 admin fee. All programs are subject to availability. **All prices/programs are subject to change without notice.**

** -Plus Insurance session fee which is retained by Rinks to reduce its total insurance costs. This is not health insurance.