## FIGURE SKATING BRIDGE PROGRAM

LEARN TO SKATE AT THE RINKS AT SHELTON

WINTER 2017 SESSION

## 9 SATURDAY SESSIONS FOR \$199

JAN 7 - MAR 4 9AM-10AM

Designed for Basic Skill Level 5 passed and above. Learn the fundamentals of figure skating, including moves in the field, jumps, spins, synchro and theater on ice in a formalized environment.

Open to Basic Skill Level 6 - Freestyle Level 6

## SPACE IS LIMITED SIGN UP NOW

Each class consists of a 30 minute group lesson accompanied by a 20 minute practice.

THE RINKS

RinksAtShelton.com | SportsCenterCT.com | 203-929-6500 784 River Rd. (Exit 53 off Merritt Pkwy) Shelton, CT 06484

## Winter 2017 Bridge Registration

Payment in full must accompany registration

Name:	Date of Birth:	_//	Gender: M / F
Address:	City:	Stc	ate: Zip:
Parent/Guardian:			
Primary Phone #:	Secondary Phone	» #:	
Email Address:	Skate Experience/Level if known (0-10)		
Saturday 9:00-10:00 am	Cost:		
	# Of cl	asses x \$19	99 = \$
	Admin	Fee:	\$10
	Skate R	ental Card (if r	needed) <b>\$35</b>
	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 Spo	rtsCenter of Connectic	cut to charge the above amount.
<ul> <li>The Rinks at Shelton ("Rinks") RELEASE OF LIABIL PARTICIPANT PLEASE READ BEFORE SIGNING (Liabin consideration of being allowed to participate in any way in any and all a agrees that:         <ol> <li>The risk of injury from the activities involved in this program is significant, in discipline may reduce this risk, the risk of serious injury does exist; and.</li> <li>PARTICIPANT KNOWINGLY AND FREELY ASSUMES ALL SUCH RISI OF THE RELEASEES or others, and assume full responsibility for my partici any presence or participation, PARTICIPANT willingly agrees to comply with the stated and customary terriduring my presence or participation, PARTICIPANT will remove myself from</li> <li>PARTICIPANT, for myself and on the behalf of my heirs, assigns, personal re agents and/or employees, other participants, sponsoring agencies, sponsors, ad ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to perse extent permitted by law.</li> </ol></li></ul> <li>Arbitration: In further consideration of allowing me to participate in the afore: PARTICIPANT believes PARTICIPANT may have against Rinks arising from arbitration shall apply the Federal Rules of Evidence to all proceedings.</li> <li>I hereby grant Rinks the right to use photographs, video images at Arbitration shall be commenced within one (1) year from the date on which a agreed to by all parties. The submission to American Arbitration Association PARTICIPANT HAS READ THIS RELEASE OF LIABILITY AND ASSUM PARTICIPANT HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT FOR PARENTS/GUARDIANS OF PARTICIPANTS OF</li>	arger Type Copy ava activities, leagues, clinics, events, ska cluding the potential for permanent paraly KS, being both known and unknown of m pation; and, ms and conditions for participation in the participation and bring such to the attent presentatives, next of kin, HEREBY REI Ivertisers, and, if applicable, owners and I on or property, WHETHER ARISING FR mentioned Program, PARTICIPANT here n my activities at the Rinks. The arbitrati nd/or other media of participant for iny alleged claim first arose. Furthermor is shall be unlimited and the arbitration aw IPTION OF RISK AGREEMENT, FU C, AND SIGNS IT FREELY AND VO	Ating programs at Rinks (" ysis, disability and death, and any participation in the Program Program, if however, PARTIG tion of the nearest official imm LEASE, INDEMNIFY, AND lessors of premises used to cor ROM THE NEGLIGENCE OF eby agrees to submit to bindin ion shall be pursuant to the rul publicity, advertising and re, the arbitration shall be hel ward may be enforced by any JULY UNDERSTANDS ITS DUNTARILY WITHOUT E 18 AT TIME OF REGISTR/	Office). "Program"), Participant, acknowledges and while particular rules, equipment, and personal m EVEN IF ARISING FROM THE NEGLIGENCE CIPANT observe any unusual significant hazard mediately, and, HOLD HARMLESS RINKS, their officers, officials, nduct the event ("Releasees"), WITH RESPECT TO F THE RELEASEES OR OTHERWISE, to the fullest ng arbitration any and all claims which les of the American Arbitration Association. The d/or other commercial purposes. Id in Shelton, Connecticut unless otherwise mutually court of competent jurisdiction. S TERMS, UNDERSTANDS THAT ANY INDUCEMENT. ATION)
This is to certify that I, as parent/guardian with legal responsibility for this Participant, do or release and agree to indemnify and hold harmless the Releasees from any and all liabilities i NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.	onsent and agree to his/her release as provide	ed above of all the Releasees, an	nd, for myself, my heirs, assigns, and next of kin. I

X Parent/Guardian or Participant Signature

Date Signed:

\* 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.