



Learn to Skate USA Group Lessons

- Participant's Name : _____ Date: _____
- Participant's DOB : _____
- Parent / Guardian : _____
- Address : _____
- City : _____
- State : _____ Zip : _____
- Phone 1 : _____ Phone 2 : _____
- Email : _____

Full Curriculum Classes are held during Learn to Skate Sessions:

Wednesday Afternoons
Saturday Mornings

Introductory of Basic Skills Only held during Public Skate:

Sunday Afternoons

*Current session times are posted on www.lancerlotsportscomplex.com *

Payment of \$75.00 for a 5 Session Punch Card

which provides:

30 minutes of group lessons, skate rental and practice time during the sessions

Form of Payment: Cash / Check / Credit Card / Other

Please Read the Attached Release of Liability:

In order to participate in our program, you must agree to the terms on our Release of Liability Form. By choosing "I agree" below, you are stating that you have read our Release of Liability Form and you are agreeing to the terms stated therein.

Yes, I agree _____ initial



Lancerlot Sports Complex
Learn To Skate USA Students

Please sign and return to Learn to Skate Check-In Table on the first day of class!

PARTICIPANT WAIVER

~ PLEASE READ BEFORE SIGNING! ~

January 1, 2019 – December 31, 2019

In consideration of being allowed to participate in any way in the skating programs of the Lancerlot Sports Complex **such as, Learn to Skate Classes, Group Skating, Freestyle Skating Sessions, Figure Skating Performances, Recitals or Shows, Stick and Puck and Pick-Up Hockey, or any other open hockey program, related events, and activities of our public sessions** you must sign this waiver once a year before you are allowed to participate in any activity.

I, _____, the undersigned, acknowledge, appreciate and agree that:
{Please Print Participant Name }

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death; and while paralysis and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist and,

2. I, KNOWINGLY AND FREELY ASSUME ALL SUCH RISK, both known and unknown of my participation in any activity, 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 in such activity. 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, INDEMNITY, AND HOLD HARMLESS the Lancerlot Sports Complex, their officers, officials, agents and or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and leasers of premises used to conduct the event (“Releases”), 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 full extent permitted by law.

5. The Lancerlot Sports Complex has my permission to use my photograph or my child’s photograph publicly to promote the Lancerlot Sports Complex. I understand that the images may be used in print publications, online publications, presentations, websites and social media. I understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT AND PHOTO RELEASE AND 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: _____ Age: _____
PARTICIPANT’S SIGNATURE

**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 Releases, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releases 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 full extent permitted by law.

X _____ Date Signed: _____
PARENT/GUARDIAN SIGNATURE

EMAIL ADDRESS (please print neatly): _____
Your mail address will not be shared.

Email addresses are for in-house use only and will be used to share important information such as class cancelation, etc.

EMERGENCY PHONE NUMBERS: _____