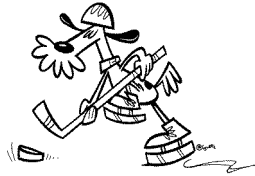


SHARPER EDGE SKATING SCHOOL (mailing address only)
100 POWDERMILL RD- PMB 233
ACTON, MA 01720 (978) 369-0088



HOCKEY EDGE AND DRILLS CLASS
@ VALLEY SPORTS ARENA, CONCORD MA.

Please Note: For the Summer Session, the Hockey Edge Class and the Hockey Skills Class will be combined. Each skater must wear FULL equipment to participate.

Please print all Info:

Skater's Name: _____ DOB: _____

Address: _____ City: _____ Zip: _____

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

Parents' Names: _____ / _____

Emergency Contact: _____ Emergency Phone: _____

Summer Session 06/29/10 - 07/20/10 No Ice: 07/13/10

Classes are subject to change due to enrollment. Sorry, there are no refunds once the session starts. 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.**

Tuesday 06/29/10-07/20/10	4:10 - 5:30PM	3 weeks	1 hour 20 minutes	\$102.00
Please check below what days you will be attending class.				
____ 06/29 Rink 1	____ 07/06 Rink 1	____ 07/20 Rink 1		
_____ # of classes x \$34.00			Total:	
CONFIRMATIONS WILL NOT BE SENT.			Late fee: If payment received after 06/14/10	\$10.00
			TOTAL:	

Applications due: June 14th, 2010

Skating in Rink 1

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 06/14/10. 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 RELEASEE OR OTHERS, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions of 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 ARENA, 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 this 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 and all liabilities incident to my minor child's involvement or participation in the program 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.