

**SHARPER EDGE SKATING SCHOOL (Mailing address only)**

**100 POWDERMILL RD- PMB 233**

**ACTON, MA 01720 (978) 369-0088**

Sharper Edge Skating School would like to invite your child to our **Penguin Program**, which is our **beginner** Learn to Skate class for Pre-schoolers.



**Winter 2 Session 01/09/12-03/29/12 NO ICE: Jan. 10-16, Feb. 20-23**

Monday	9:30-10:15 AM	10 weeks	\$190.00
Monday	10:30-11:15 AM	10 weeks	\$190.00
Tuesday	9:30-10:15 AM	10 weeks	\$190.00
Tuesday	10:30-11:15 AM	10 weeks	\$190.00
Wednesday	10:30-11:15 AM	10 weeks	\$190.00
Thursday	9:30-10:15 AM	10 weeks	\$190.00
Thursday	10:30-11:15 AM	10 weeks	\$190.00

In the Penguin Program, you save the \$30 registration fee. All Skaters **must** bring their own bike helmet, single blade skates, warm clothes and gloves. This "Special" is only valid for the session listed above. Please sign and send the application with payment to us by **12/20/11**. Your child is not enrolled in the class until a completed form and full payment are received. **A \$10.00 late processing fee will be applied to all applications received after the due date. Classes fill quickly, so sign-up early!**

**\*\*Please note:** Classes are subject to change due to enrollment.  
There are no family discounts for Penguin Program skaters.  
Only 1 Make-up is allowed per session during "Penguin" hours only.  
No parents are allowed on the ice.

**Parents of minors should stay in the building during class.**

**NO REFUNDS ONCE THE SESSION STARTS.** Due to the young ages that are in our Penguin Program, a special 2 week "trial period" may be requested through the Sharper Edge office. However, the request must be made prior to the session due date. You will be responsible to pay for the 2 "try it" classes. This is a one time offer.

**Print all info:** Skater's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

**Class Day & Time: First Choice:** \_\_\_\_\_

**Second Choice:** \_\_\_\_\_

**\*\*You will be given your first choice unless there are scheduling conflicts. We will notify you with any changes. Confirmations will not be sent. Due Date: 12/20/11**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent or Legal Guardian

Parent's Name Printed: \_\_\_\_\_

**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:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Visit our website at: [www.sharperedgeskating.com](http://www.sharperedgeskating.com)**  
**Visit our website to see our new calendar for the session information.**

