



**Sharper Edge Skating School**  
 100 Powdermill Road –PMB 233  
 Acton, MA 01720  
 (Mailing Address Only)

(978) 369-0088  
 Info@sharperedgeskating.com



## Fall Session 2024 - Hockey Edge Application

\*\*\*\* NO STICK & PUCK; Please do NOT wear full equipment \*\*\*\*

Print clearly:

Skater's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: (*Print Clearly*) \_\_\_\_\_

Additional Emergency Contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

## \*\*\*FALL HOCKEY EDGE CONTRACT\*\*\*

**09/09/24 – 10/30/24 No Ice: 10/14**

**FORM IS DUE 08/24/24 - \$30.00** late fee will be applied. Please highlight which class you would like. Please mark 1<sup>st</sup> & 2<sup>nd</sup> choice on the left. You will receive your first choice unless contacted by the SESS Office. Confirmations will not be sent.

CHOICE	DAY	START	END	DURATION	WEEKS	PRICE
	<b>Monday</b> No Ice: 10/14	4:00 pm	4:35 pm	35 Mins	7 weeks	\$223.00
	<b>Monday</b> No Ice: 10/14	6:20 pm	7:00 pm	40 Mins	7 weeks	\$255.00
	<b>Tuesday</b>	4:00 pm	4:45 pm	45 Mins	8 weeks	\$328.00
	<b>Tuesday</b>	4:45 pm	5:30 pm	45 Mins	8 weeks	\$328.00
	<b>Wednesday</b> RINK 2	4:00 pm	5:00 pm	1 Hour	8 weeks	\$436.00
	<b>Thursday</b> ***9/12 – 11/21*** No Ice: 10/31	4:00 pm	4:45 pm	45 Mins	10 Weeks 3 Week Extension 11/7, 11/14, 11/21	\$409.00
	<b>Friday</b> ***9/13 – 11/22*** No Ice: 10/11 & 11/8	4:00 pm	4:45 pm	45 Mins	9 Weeks 3 Week Extension 11/1, 11/15, 11/22	\$368.00

<b>Registration Fee:</b> Sept 24-Aug 25	\$30.00
<b>LATE FEE:</b> If received after 08/24/24	\$30.00
<b>TOTAL:</b>	

Please register early. Applications will be processed in the order in which they are received. Your hockey player is not enrolled in the class until a completed form and full payment are received. Sharper Edge reserves the right to limit enrollment. The class you select will be your class day and time for the entire session. There are no switches or makeup classes. Family discounts only apply to 3 or more skaters enrolled in the Hockey Edge program ONLY.

**Don't forget to sign the RELEASE on the back.**  
**Skaters will not be permitted on the ice without a completed release.**

Visit our website at: [www.SharperEdgeSkating.com](http://www.SharperEdgeSkating.com)

## **Sharper Edge Skating School Waiver and Release**

The undersigned agrees to follow all ice rules set by The Sharper Edge Skating School. I hereby assume all risks and hazards incidental to participation in any and all Sharper Edge Skating School Activities. I hereby waive, release Sharper Edge Skating School and their professionals and employees of any harm or injury.

**X** \_\_\_\_\_

Signature (parent or guardian if skater is under 18 yrs)

\_\_\_\_\_ 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 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 \_\_\_\_\_