

BAYONNE BLADES REGISTRATION FORM 7/1/2024-6/30/2025

Skater's Full Name: _____ Age: _____ D.O.B.: _____ Gender: _____

Address: _____ City: _____ Zip: _____

Primary #: _____ Secondary #: _____

Health issue to be aware of _____

Lesson day chosen: _____ Parent/Legal Guardian Name: _____

Email address: _____

Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement

In consideration of my participation in any Learn to Skate USA related activity, I acknowledge that I understand the nature of the activity and that I, and/or my minor child, am qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that if conditions are unsafe, I, and/or my minor child, will immediately discontinue participation in the activity. I fully understand that skating involves risks of serious bodily injury, including permanent disability, paralysis, and death, and that these and other risks may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the Releases named below; and that there may be other risks either not known to me or not foreseen at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the activity. I hereby release, discharge, and covenant not to sue Learn to Skate USA, its Member Clubs and Programs, their respective administrators, directors, agents, officers, volunteers, and employees, and any sponsors and advertisers of any -sanctioned event in which I participate (each considered one of the Releases herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releases. This release waiver of liability and express assumption of risk agreement does not apply to any liability, claims, demands, losses, or damages arising out of the gross negligence of, or intentional, willful or wanton misconduct of Releases. If I, or anyone on my and/or my minor child's behalf, makes a claim, I agree I will indemnify, defend, save, and hold harmless each of the Releases from any loss, liability, damage, or cost which any may incur as the result of such claim. I acknowledge that I have read this release, waiver of liability and express assumption of risk agreement and fully understand it. Please enter all participants' names below and have the parent/guardian sign for all minors under the age of 18 years old.

Covid Release of Liability, Assumption of Risk and Indemnity Agreement

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing. I further acknowledge that Bayonne Blades, LLC has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19. I further acknowledge that Bayonne Blades LLC cannot guarantee that my skater will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, staff, and other skaters and their families. I voluntarily seek services provided by Bayonne Blades LLC and acknowledge that I am increasing my risk/my skaters risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending Bayonne Blades lessons. I hereby release and agree to hold Bayonne Blades LLC harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the skate school, or that may otherwise arise in any way in connection with any services received from Bayonne Blades LLC. I understand that this release discharges Bayonne Blades LLC from any liability or claim that I, my heirs, or any personal representatives may have against the skate school with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Bayonne Blades LLC. This liability waiver and release extends to the skate school together with all owners, partners, and employees.

Parent/Legal Guardian Signature _____ Date _____

Bayonne Blades maintains a no refund policy & make up classes are not permitted. Initial here _____

Bayonne Blades reserves the right to obtain & use photos/videos taken for use in promotion. Initial here _____

For Office use only (Registration fee due upon first payment):

FALL Group/Aspire: Day _____ Total _____ Check # _____ Cash Date received _____

FALL Private Lesson Ice: Day _____ Total _____ Check # _____ Cash Date received _____

MAY ICE SHOW FEE DAY _____ Total _____ Check # _____ Cash Date received _____

WINTER Group/Aspire: Day _____ Total _____ Check # _____ Cash Date received _____

WINTER Private Lesson Ice: Day _____ Total _____ Check # _____ Cash Date received _____

SPRING Group/Aspire: Day _____ Total _____ Check # _____ Cash Date received _____

SPRING Private Lesson Ice: Day _____ Total _____ Check # _____ Cash Date received _____

SPRING FREESTYLE: Day _____ Total _____ Check # _____ Cash Date received _____