

The Rink on the Beach Learn to Skate Program



Parent's Name Student's Name			me
Age	DOB	Male or Female	US Citizen? Y / N (circle one)
Address			
Address	City	State	Zip Code
Phone		Email	
Are you a current mem	ober of Learn to Skate USA?	Y / N (circle one)	Member Number
What day(s) are you sig	gning up for? Circle one for o	ne lesson a week or circle to	wo for two lessons a week. If you don't know your
			Semester
Monday	Level		
Thursday	Level		
Saturday	Level		
ASSUMPTION OF RISK: I am awa tains potential dangers to the ic recognize and acknowledge that and using common sense. RELEASE AND WAIVER OF CLAIM have or may in the future have a TO RELEASE THE RINK from any ment due to any cause whatsoer ARBITRATION in further conside have against the Host arising fredence to all proceedings. Arbitration shall be commenced agreed to be all parties. The sub BINDING EFFECT OF AGREEMEN ENTIRE AGREEMENT: In entering	By signing this document By signing the By signing this by signing the By signing this by signing this by signing this by signing this by signing the By signing this by signing the By signing this by signing the By s	is, dangers, and hazards, which can result in to assume and accept any and all known and in be greatly reduced by taking lessons, abiding to participate in THE RINK'S ice-skating activities RINK'S activities at THE RINK. It is to not the part of THE RINK'S activities at THE RING and the part of THE RINK'S activities at THE RING ice-skating activities in the Arena. I hereby a in shall be pursuant to the rules of the Amer yalleged claim first arose further, the arbitrachall be unlimited and any court of competent reement shall be effective and binding upon to oral or written representations other than who	cluding the right to sue. al representatives. serious personal injury or death. I am also aware that the ice-skating arena con- unknown risks of the injury while participating in ice-skating activities. I further ng by the Skater Responsibility Code (now known as "your Responsibility Code") tities at THE RINK, I hereby agree as follows TO WAIVE ANY AND ALL CLAIMS that I a may suffer, as a result of my participation in the activity described in this Agree- INK. gree to submit to binding arbitration and any and all claims which I believe I may ican Arbitration Association. The arbitrators shall apply the Federal Rules of Evi- ation shall be held in town where the Host is located unless otherwise mutually t jurisdiction may enforce the arbitration award. my heirs, next of kin, executors, administrators, assigns and representatives.
Parent/Guardian Si	gnature		Date