



presents:

Learn to Skate at the Broome County Arena!

Learn to skate in the warmth and comfort of the Broome County Veteran's Memorial Arena!

- **Winter 2010 Learn to Skate on Sundays from 3:00–4:00 pm, Jan. 10, 17, 24, Feb. 7, 21, 28, 6-Sessions for \$60** – includes 1/2 hour lesson, 1/2 hour practice, and rental skates (skate sizes are limited, so register early!)
- **Private Lessons & Practice Ice Time** – 1:00–3:00, same Sundays as above. Contact BCWC for price.
- **Parent-Sibling Skate-Along, 6-Sessions for \$18** – Same Sundays as above, skate 1/2 hour only in the practice area. **Lessons are not included in this program!** If you want any lessons, you must pay \$60.
- **Jan. 3 is our National Skating Month Meet & Greet Day, 1:00–4:00 pm for just \$10** – Lessons start the following Sunday, so come try on your skates, meet our coaches, and celebrate National Skating Month with us. Games, demonstrations, prizes, refreshments!
- **Feb. 26 is BC Winter Club Night at the B-Sens** – Group tickets available through BC Winter Club.
- All participants must wear gloves, long sleeves and pants. Bike/hockey helmets and knee/elbow pads are strongly suggested. Anyone who cannot skate unassisted, and all participants under age 10, must wear a helmet and snowpants.

BC Winter Club's Learn-To-Skate at The Arena Program Registration Form

Please complete this form and submit with payment by January 3, 2010.

Learn-To-Skate Lesson Participant (please print) _____ @ \$60

Parent Participant (no lesson) (please print) _____ @ \$18

Sibling Participant (no lesson) (please print) _____ @ \$18

Date of Birth _____ Phone _____

Email _____

Address _____

Skating Level: I have never skated before or need assistance
 My skating level is _____

Skates: I will bring my own skates with me
 I need rental skates in size _____ Child Adult Hockey Figure

USE ONE FORM PER PARTICIPANT

Both sides of this form must be completed and submitted with registration fee(s) by January 3, 2010. Hand in at the registration table or mail to: BC Winter Club – LTS, PO Box 647, Vestal, NY 13851. Make checks payable to "BC Winter Club".

Questions? Call Nancy Shuman at 607-729-9369, Scott Goldsone at 607-321-3574, or email learn.to.skate@bcwinterclub.org

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

("Agreement")

In consideration of participating in BC Winter Club activities, I represent that I understand the nature of figure skating activities ("activity") and that I am qualified, in good health and in proper physical condition to participate in such "activity". I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the "activity".

I fully understand that this "activity" involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions or inactions, those of others participating in the "activity", the conditions in which the "activity" takes place, or the negligence of the "releasers" named below, and that there may be other risks either not known to me or not readily foreseeable 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 the BC Winter Club, United States Figure Skating, it's directors, officers, administrators, sponsors, volunteers, agents, employees, staff, instructors, trainers, other participants, and, if applicable, owners and lessors of premises on which the "activity" takes place (each considered one of the "Releasers" 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 "releasers" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releasers, I will indemnify, save, and hold harmless each of the releasers from any loss, liability, damage, or cost which any may incur as the result of such claim.

The BC Winter Club has the right, but not the obligation, to provide rules, regulations and/or ice monitors for Club Ice. We hereby acknowledge that the BC Winter Club shall not be responsible for the supervision of the participants at Club Ice.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Print Name of Participant _____

Date _____

Signature of Participant and/or Parent/Guardian if participant is under age 18 _____

Parental Consent and Indemnification Agreement

I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such "activity". I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasers from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasers or otherwise, including negligent rescue operations, and further agree that if, despite this release, I the minor, or anyone on the minor's behalf makes claims against any of the above Releasers, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each one of the Releasers from litigation expenses, attorney fees, loss liability, damage, or cost and Releasers may incur as the result of any such claim.

Printed Name of Parent/Guardian _____

Date _____

Signature of Parent/Guardian _____

Consent for Medical Attention or Treatment

I certify that I, the member, or I, the parent/guardian of said participant, give my consent to the BC Winter Club and the facility the activities are taking place in and their staff and to members of the BC Winter Club, their Board of Directors and volunteers to obtain medical care from any licensed physician, hospital, or clinic, including transportation and emergency medical services, for myself, ourselves, or said participant for any injury that could arise from participation in these activities.

Name of 1st Minor Child Member _____
(please print)

Name of 2nd Minor Child Member _____
(please print)

Name(s) of Parent(s)/Guardian(s) _____
(please print)

1st Parent/Guardian Signature _____ Date _____

2nd Parent/Guardian Signature _____ Date _____

Name of 1st Adult Member _____
(please print)

1st Adult Member Signature _____ Date _____

Name of 2nd Adult Member _____
(please print)

2nd Adult Member Signature _____ Date _____

This Consent for Medical Attention shall be binding and effective for the current membership year of the BC Winter Club.