**Blackfalds Skating Club**

**Powerskating Ages 7-10**

2021 – 2022 Registration Form POWERSKATING

|  |  |
| --- | --- |
| **Skater Last Name:**  **Skater First Name:** | **Parent/Guardian Names:** |
| **Phone Number:** | **Email:** |
| **Address:** | |
| **Birthdate (Day/Month/Year):** | **Age:** |

Male  Female Medical condition that may affect your child on the ice:

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

**PRIMARY EMERGENCY CONTACT**

|  |  |
| --- | --- |
| Last Name:  First Name: | Contact Number: |
| Secondary Contact Number: | Relationship to child: |

**SECOND EMERGENCY CONTACT**

|  |  |
| --- | --- |
| Last Name:  First Name: | Contact Number: |
| Secondary Contact Number: | Relationship to child: |

Registration forms will be used to secure spot on a first come first serve basis in person. Any remaining open spots will be filled by first come first serve email. Payment is due within 10 days of receiving the registration. If payment is not received at this time, and there is a wait list, your spot will be given to the next in line skater and yours will no longer be secured until payment is collected.

**Payment to be submitted through Cash or Cheque. Debit/Credit Card not accepted.**

Please select one of the following options:

**Powerskating (1 day/week)**

Session #1  $150

October 18 – December 20

Monday 5:15PM – 6:15PM

Session #2  $135

January 10 – March 14

Monday 5:15PM – 6:15PM

\*\*This is not a learn to skate program, all players MUST be able to skate forward, skate backward and stop.

\*\*Full equipment is required.

Last level of hockey/ringette completed:\_\_\_\_\_\_\_\_\_\_ N/A

Payment can be collected at time of registration, or post-dated cheques can be made for November 1, 2021 for the Fall session and February 1, 2022 for the Winter session. These cheques can be given to the club when skating begins.

* Club fees are non-refundable after November 1, 2021 and February 1, 2022. If your child drops out or you move after this date, you will not be reimbursed for your registration fees. For children that choose not to participate in the program prior to November 1, 2021 or February 1, 2022 (for winter session registrants only) a $50 fee will be withheld to cover the costs of registration fee to Skate Canada and administration.
* There will be no pro-rated registration fees for those that register after initial registration date, or once program begins.
* A $50.00 NSF charge will be charged on all NSF cheques. If the NSF charge and the amount of the NSF cheque is not cleared up within 14 days we will have to suspend your child’s participation until it is cleared up in full.

**USE OF PHOTO OR VIDEO - CONSENT:** Under the Freedom of Information and Privacy Act, it is necessary for the Blackfalds Skating Club to obtain consent in order to use photos and/or video footage of people for the purposes identified below. Any use of these images by the Blackfalds Skating Club will not go beyond a reasonable amount of time.

**Collection and Use:** The photos and/or videos taken on this occasion will be used to promote the Blackfalds Skating Club and the programs and services (i.e. recreation, fitness etc.) offered by the club. Your consent gives the Blackfalds Skating Club the right to use these images in different media. These may include but are not limited to newspaper ads, brochures, newsletters and other printed materials; and on the Blackfalds Skating Club’s website. Though the images will be used only by the Blackfalds Skating Club, the materials that are used may be distributed elsewhere.

**Privacy Act:** The Blackfalds Skating Club holds all the information contained on this form in complete confidentiality and does not make it available to anyone beyond our professional coaches and executive members. Skate Canada requires all information but uses it for their records and for insurance purposes only.

I hereby agree that I will not hold the Blackfalds Skating Club or it’s officials responsible in any way for injuries which may occur to my child(ren) or self during the preparations for, or during lessons, practices, test days, clinics, or other events sponsored by or in connection with the Blackfalds Skating Club.

**Personal Consent:** I hereby waive any rights to inspect or approve the use of photographs or video footage taken of me by photographers working on behalf of the Blackfalds Skating Club, and hereby consent to the uses specified above in the collection and use section. In a group setting, other than family, each individual appearing must sign this consent in order to have the photo and/or video footage available for the Blackfalds Skating Club’s use. Only one signature is required per family. If a minor is appearing alone in a photo, the consent of a legal guardian is required.

I do not give consent  I give consent

**Privacy Statement:** The privacy provisions of the Freedom of Information and Protection of Privacy Act (FOIP) protects this personal information. If you have any questions about the collection and use of your information, contact the Registrar for the Blackfalds Skating Club.

PARENT(S) NAME PRINTED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT(S) SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## **SKATE CANADA ASSUMPTION OF RISK AND WAIVER**

**PLEASE READ CAREFULLY:**

**1. ACKNOWLEDGMENT OF INHERENT RISK**

I understand that participation in skating, figure skating, and any other sporting activities listed in the enclosed appendix (hereinafter the “Sports Activity”) is voluntary, and involves inherent risk during participation, including the risk of possible accidents, physical injury, or exposure to the COVID-19 virus or other infections or infectious diseases as a result of attending training, club events or competitive events. I freely accept and fully assume all such risks, dangers and hazards, including but not limited to personal injury, disease transmission, death, property damage or loss, resulting from my participation. I have carefully considered the risks involved, and I have full confidence that reasonable precautions will be taken to ensure the safety and well-being of myself (or my son/daughter/ward).

**2. WAIVER**

I do for myself (or my child), and our respective heirs, executors, administrators, successors and assigns, hereby waive, release, and forever discharge Skate Canada and/or Skate Canada: Alberta-Northwest Territories/Nunavut Association (Skate Canada: Alberta-NWT/Nunavut Section), all Regions of Skate Canada: Alberta-NWT/Nunavut Section, club or skating school name, their officers, partners, agents, employees, servants, representatives, volunteers, coaches, officials, successors and assigns (the “Representatives”) of and from any actions, causes of action, complaints, demands and claims or any recourse whatsoever (“Claims”) that I have or may have in the future in any way connected with my (or my child’s) participation in the Sports Activity contemplated herein, whether in law or in equity, in respect of personal injury, illness or disease transmission, loss of life, or property damage of any kind or nature, and I do hereby discharge the Representatives from any such liability. This includes negligence, breach of contract or breach of any statutory or other duty of care.

**3. INDEMNIFICATION**

I further agree to fully indemnify and defend Skate Canada and/or Skate Canada: Alberta-NWT/Nunavut Section, all Regions of Skate Canada: Alberta-NWT/Nunavut Section, club or skating school name and any of their Representatives from and against any and all Claims brought against Skate Canada and/or Skate Canada: Alberta-NWT/Nunavut Section, all Regions of Skate Canada: Alberta-NWT/Nunavut Section, club or skating school name and any of their Representatives, including all related costs and expenses, and against any loss, costs, damages, or expenses which Skate Canada and/or Skate Canada: Alberta-NWT/Nunavut Section, all Regions of Skate Canada: Alberta-NWT/Nunavut Section, club or skating school name and any of their Representatives may sustain, suffer, incur, or be liable for resulting from, arising from, or in any way related to my (or my son/daughter/ward’s) participation in the Sports Activity. I also agree and undertake not to make any claim or take any proceedings against the Representatives set out above, or any other person or corporation which might claim contribution or indemnity under the provisions of any statute or otherwise from the Representatives set out above.

**4. SEVERABILITY**

The provisions of this Assumption of Risk and Waiver shall be deemed severable and if any provision or portion thereof is held invalid, illegal or unenforceable for any reason, the remainder shall not thereby be invalidated, but shall remain in full force and effect.

**Acknowledgement:** I am aware of the nature and effect of this Assumption of Risk and Waiver and I fully understand all of the terms and conditions above. I understand that I have given up substantial rights by signing this Assumption of Risk and Waiver and I am signing it freely and voluntarily without inducement.

**Parent/Guardian**: I certify that I am the parent or legal guardian of the participant named below and that I am entitled to his or her custody and control. I understand the aforesaid inherent risks that could arise from these activities, I grant permission for my son/daughter/ward to participate in the Sports Activity and other activities incidental thereto and I execute this Assumption of Risk and Waiver on behalf of myself and my son/daughter/ward.

**Participant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth (D/M/Y): \_\_\_\_ /\_\_\_\_ /\_\_\_\_**

Participant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date (D/M/Y): \_\_\_\_ /\_\_\_\_ /\_\_\_\_