

Date: _____

Niagara Speed Skating Club

2018/2019

REGISTRATION FORM

Bill Burgoyne Arena, St. Catharines Fridays 6:00 pm – 7:30 pm (1.5 hours /week)

SKATER INFORMATION		
Skater #1 name:	D.O.B: (dd/mm/yyyy)	
Allergies/Medical:		
SSC #	Helmet #	
Skater #2 name:	D.O.B: (dd/mm/yyyy)	
Allergies/Medical:		
SSC #	Helmet #	
Skater #3 name:	D.O.B: (dd/mm/yyyy)	
Allergies/Medical:		
SSC #	Helmet #	
CONTACT INFORMATION		
Street address:		
City/Town:	Prov/State:	Postal/Zip Code:
Home Ph.	Cell Ph.	
Email:		
2nd Email:		
Parent/Guardian Name (if skater is under 18)		
EMERGENCY CONTACTS		
Name (relationship):	Phone:	
Family Doctor's name:	Phone:	
MEMBERSHIP AND RENTAL FEES		
The Ontario Speed Skating Association (OSSA) mandatory yearly membership fees is included in the membership amounts		
Fees in full are payable by cash, email transfer or cheque. There will be a fee for NSF cheques of \$45.00		
Skate rental includes guards & soakers maintenance and sharpening		
Skater #1 Membership		\$495.00
Skate rental #		\$130.00
Skater #2 Membership		\$420.00
Skate rental #		\$130.00
Skater #3 Membership		\$370.00
Skate rental #		\$130.00
TOTAL FEES BALANCE		
FUNDRAISING		
Deposit of \$80.00 post dated cheque per family. Once family fundraising goal has been met, cheque will be returned		
Received		

OFFICE USE ONLY

FULL payment Date _____ amount _____ cash _____ chq _____ e/tran _____

Refund Policy & Waiver

Location: Bill Burgoyne Arena, St. Catharines

Day/Time: Fridays 6:00 pm – 7:30 pm (1.5 hours /week)

REFUND POLICY

Requested refunds will be one half of the prorated amount for the remainder of the season.

MEDICAL INFORMATION

IT IS THE RESPONSIBILITY OF THE SKATER (PARENT) TO ENSURE THEIR FAMILY DOCTOR APPROVES OF THE ACTIVITIES AND ENVIRONMENT FOR SPEED SKATING

DUE TO THE PRIVACY ACT, WE DO NOT COLLECT HEALTH CARD INFORMATION FROM THE MEMBERSHIP. THEREFORE, ALL MEMBERS NEED TO HAVE THEIR HEALTH CARD NUMBER AND CONTACT NUMBER AVAILABLE AT ALL PRACTICES AND COMPETITIONS.
AN ADULT MUST ACCOMPANY ALL MINORS TO PRACTICE AND COMPETITIONS.

WAIVER

In consideration of you accepting this application, I hereby for myself and my heirs, executors and administrators, waive and release any and all right and claims for damage I may have against the Niagara Speed Skating Club, the Ontario Speed Skating Association, and Speed Skating Canada or on any speed skating Organization, their respective directors, officers, agents, representatives or successors for injuries suffered by me during club organized training, practice and competition events.

I give permission to:

- Use the my name and/or skater's name(s), address, email and phone number in our member email group for Club updates
- Post pictures, videos and event results of the skater/myself on the Club's website, Facebook account, in or at the Club's arena, in the local newspapers and on photo and video sharing websites, without express written permission.

REGISTRATION DECLARATION

I have read and agree to the waiver conditions on this form.

Skater #1 name:

Skater #2 name:

Skater #3 name:

Signature of Skater 18 years or older / Parent or Guardian if Skater(s) is/are under 18 years

Date