

# Winter Camp

Thursday,  
January 21, 2021

1-Day price \$75

*Includes: 1 hour of group classes with a certified instructor, skate rentals and participation in on-ice games.*

*see camp application on the back of this flyer.*



# Winter Camp 2021 Application and Waiver

## Thursday, January 21, 2021

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ BEGINNER: \_\_\_\_\_ INTERMEDIATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PARENT(S)/GUARDIAN(S) NAME: \_\_\_\_\_

METHOD OF PAYMENT: \_\_\_\_\_

CC #: \_\_\_\_\_ CVC: \_\_\_\_\_ EXPIRATION: \_\_\_\_\_

### Participation Waiver and Release of Liability

I acknowledge and assume all risks of injury associated with participation in PROTEC PONDS' skating programs. I also agree that any and all of its current or former directors, officers, members, employees, attorneys, representatives, insurers, agents, successors and assigns (individually and collectively the "RELEASEES"), shall not be liable to me or my child for any injury or damage, however caused, resulting directly or indirectly from my child's participation in any PROTEC PONDS programs at any time proceeding, during or after such program is in session. I further understand that no medical, dental or accident insurance is provided to any PROTEC PONDS program participant, including my child, and I by PROTEC PONDS.

I release, discharge and promise not to sue the RELEASEES from and with respect to any and all claims, actions, suits, liabilities or damages whatsoever which against the RELEASEES, my child and I have hereafter can, shall or may have for, upon, or by reason of any injury or damage to me or my child. I intend this release to be a general release of any and all claims to the fullest extent permissible by law.

I agree to indemnify and hold harmless the RELEASEES from and injury or damage, however caused, sustained by an invitee or guest if either me or my child resulting directly or indirectly from that invitee or guest's participation in any and all PROTEC PONDS programs at any time proceeding, during or after such program is in session.

I grant PROTEC PONDS the right to use all photographs or videos taken of me or my child during any PROTEC PONDS programs for advertising and promotional purposes.

SKATER'S NAME (PLEASE PRINT): \_\_\_\_\_

PARENT'S NAME (PLEASE PRINT): \_\_\_\_\_

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

