

**PARTICIPANT RELEASE OF LIABILITY AND  
ASSUMPTION OF RISK AGREEMENT  
READ BEFORE SIGNING**

Participant Name \_\_\_\_\_

In consideration of being allowed to participate in any way in the program, related events and activities, I the Undersigned, acknowledge, appreciate and agree that: 1.) The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death; and 2.) I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and 3.) I willingly agree to comply with the terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and 4.) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY AND HOLD HARMLESS THE STEEL ICE CENTER, its Officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses and liability arising out of or related to any INJURY, DISABILITY OR DEATH, I may suffer, or loss or damage to person or property, WHETHER ARISING FROM NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X \_\_\_\_\_  
Participant's Signature                      Age                      Date

**FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE  
(UNDER AGE 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X \_\_\_\_\_  
Parent/Guardian Signature    Date

Emergency Phone Number(s) \_\_\_\_\_

**Learn to Skate USA – Hockey Basics**

Learn to Skate USA is the premier skating program in the country and our mission is to provide a fun and positive experience that will instill a lifelong love of skating. The program has been developed as a beginning ice skating program which will enable skaters of all ages and abilities to learn the fundamentals of ice skating and take them successfully on to either a competitive or recreational Figure Skating, Hockey, or Speed Skating program. The Hockey curriculum is designed to teach the fundamentals of hockey skating. In four badge levels, skaters will learn how to be more proficient and agile on the ice. Proper skating techniques for the game of hockey are the primary focus of the levels. All elements will be taught without a puck. Skaters will learn the basic hockey stance, stride, knee bend, use of edges and other necessary fundamentals to be successful in hockey practices and game situations.

**Frequently Asked Questions**

**Q: What are the age and level requirements for Hockey Basics?**

**A:** Skaters age 6 and up or skaters who have passes Snowplow 1-4.

**Q: What should we wear to the Hockey Basics classes?**

**A:** You should be dressed in warm loose clothing that will not restrict movement, thin layers are best. Hockey gloves, gloves or mittens are also suggested. Helmets are required.

**Q: Will sticks be provided?**

**A:** We will have some sticks here for use but you may bring your own.

**Q: What time should we arrive?**

**A:** It is a good idea to arrive 20 -30 minutes before class begins to get checked in and ready.

**Q: Will skates be provided?**

**A:** Rental skates are included in the class fee.

**Q: Will Helmets be provided?**

**A:** Helmets will not be provided but are required.

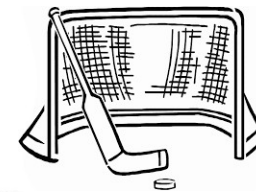
**Q: What kind of skates should be worn?**

**A:** Either hockey or recreational skates are acceptable. No double bladed skates. We suggest that you start in recreational skates.

**Q: How will I know if the class is canceled?**

**A:** The classes are rarely canceled. However, if needed, it will be posted on our website and on the voicemail at 610-625-4774 ext. 226.

We hope this answers any questions you may have had, but if you have others feel free to call or email and we will gladly help.



**2020  
Fall  
Session  
Hockey  
Basics**

**320 East 1<sup>st</sup> Street  
Bethlehem, PA 18015  
610-625-4774**

**Www.steelicecenter.com**

## 2020 Fall Session 1

### Class Days & Times

Saturdays @ 10:45 am-11:45 am  
All Levels

### Session Dates

Fall 2020 Session 1  
6 weeks

**Saturday: 9/19 – 10/24/2020**

### Program Information

- \* Yearly registration fee \$17 for Learn to Skate USA.
- \* Six Week Session - \$110
- \* Half hour skating lesson and a half hour of hockey skills.
- \* **All skaters will be required to wear a mask.**
- \* **Temperature checks upon entering facility.**
- \* Skate rental on lesson day.
- \* Skaters will need a helmet and a stick.
- \* NO Make up lessons offered for this program.  
**No credit for missed classes.**
- \* Applications accepted by phone, mail, or walk in. **Pre-registration is Required!**  
**Maximum of 50 participants.**
- \* Class sizes will be limited to accommodate for social distancing.
- \* Any further questions please contact Jon at 610-625-4774 ext. 234 or steelicehockeydirector@gmail.com
- \* **No Cash Refunds, Rink Credit will be given**

## 2020 Fall Session 1 Hockey Basics Registration Form

Skaters Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: Male Female

Contact Names: \_\_\_\_\_

Email Address: \_\_\_\_\_

New Enrollment: Yes No If yes, has your child ever skated before? Yes No  
1st time registration for the July 2020-June 2021 Season : Yes No

### Please Circle Level:

Hockey                      1                      2                      3                      4  
Power Skating

### Please Circle Session

Fall 2020:                      Session 1      Saturday

Please Sign Waiver On Back

**\* NO CASH REFUNDS \*  
RINK CREDIT WILL BE GIVEN.**