



**Bay State
Speedskating Club's
Introduction to Speedskating
Iorio Arena, Rt. 1, Walpole Ma
2008-2009 Season**

Learn the basics to Short Track Speedskating! The Bay State Speedskating Club, a local affiliate of the Northeast Speedskating Association offers three 6-week programs throughout the skating year. During these sessions our coaching staff will teach you the basics to Short Track Speedskating. Learn body position, overall skating techniques, fundamentals of racing and equipment essentials. Come join the fun!

Skaters will be grouped by ability
INCLUDES GROUP and INDIVIDUAL COACHING

Use any skates. Gloves and hard shell helmet (bicycle or hockey style) are required
Wear long sleeved shirts and gloves. Kneepads are strongly recommended.
Please arrive early for stretching and warm-up.
Sessions begin at 4:45 p.m. and end at 6:10p.m.

Please check the session(s) you will attend:

- 0 Session I Saturdays, October 11, 2008, - November 15, 2008, 4:45 p.m. to 6:10 p.m.
- 0 Session II Saturdays, December 6, 2008 – January 10, 2009, 4:45 p.m. to 6:10 p.m.
- 0 Session III Saturdays, March 7, 2009 – April 11, 2009, 4:45 p.m. to 6:10 p.m.

(Schedule subject to change to accommodate the Arena and Club schedule)

Fees for each Session (6 weeks)	Club Family Member	Non-Club Member
	\$70.00 first person	\$85.00
	\$40.00 each additional family member	\$45.00 each additional family member
Walk-on Fees	\$20.00 first person	
	\$15.00 each additional family member	

Note: Registration is limited to 50 Skaters.

**Due to ice availability, Sessions I & II will not be held on consecutive Saturdays, see club calendar <http://www.speedskaters.org/bssc/calendar.php#calendar> for cancellation details.

Send this form and your payment made to BSSC to: Bay State Speedskating Club,
C/O Russell Curtis, 55 Dickens St, Bridgewater MA 02324.

Name (Last, First, Initial) _____

Street Address _____

City/State/Zip _____

Date of Birth _____ Home Phone _____

In Case of Emergency, Contact (Name/Phone) _____

PLEASE COMPLETE THE WAIVER ON THE BACK OF THIS FORM

For more information check www.speedskaters.org or call Russell Curtis (508)-697-9942

Waiver and Release

Skater's Name (Last, First, Initial) _____

Street Address _____ City _____

State/ZIP ____/____ Home phone # _____ Date of Birth _____

Email _____

US Speedskating Membership # _____

Emergency contact (Name/Phone) _____

NOTE: THIS FORM MUST BE READ AND SIGNED BEFORE THE PARTICIPANT IS PERMITTED TO TAKE PART IN ANY BAY STATE SPEEDSKATING CLUB PRACTICE, DRYLAND, OR LEARN TO SKATE SESSION.

In consideration of my involvement in the sport and activities under the auspices of the Northeast Speedskating Association and/or the Bay State Speedskating Club, I acknowledge, appreciate, and agree that:

1. **I RISK BODILY INJURY INCLUDING PARALYSIS, DISMEMBERMENT, DISABILITY, AND DEATH** and while particular rules of my sport, equipment, and personal training, and discipline may reduce this risk, **THIS RISK OF INJURY DOES EXIST, AS WELL AS THE RISK OF DAMAGE TO OR LOSS OF PROPERTY.**
2. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISK**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERS.**
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual or unnecessary hazard during my presence or participation, I will bring such to the attention of the nearest official and:
4. **I, FOR MYSELF AND ON BEHALF OF MY HEIRS, ASSIGN, PERSONAL REPRESENTATIVES, AND NEXT OF KIN, HEREBY RELEASE, HOLD HARMLESS, AND PROMISE NOT TO SUE THE NORTHEAST SPEEDSKATING ASSOCIATION, THE BAY STATE SPEEDSKATING CLUB OR OTHER SPONSORING ORGANIZATIONS, THEIR OFFICERS, VOLUNTEERS, STAFF, SPONSORS, AND/OR AGENTS ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY AND LOSS ARISING FROM MY PARTICIPATION, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, EXCEPT THAT WHICH IS THE RESULT OF GROSS NEGLIGENCE OR WANTON MISCONDUCT.**

I have read this Release of Liability and Waiver Agreement, fully understand its terms, and sign it freely and voluntarily.

Participant's Signature _____ Date _____

Participant's Name (Printed) _____

FOR PARTICIPANTS OF MINORITY AGE (under 18 at the time of registration)

This is to certify that I/we as parent(s)/guardian(s) with legal responsibility for this participant, do consent and agree not only to his/her release, but also for myself/ourselves, and my/our heirs, assigns, and next of kin to release and indemnify the Releases from any and all Liability incident to my/our minor child's involvement as stated above.

Parent/Legal Guardian Signature _____ Date _____

Parent/Legal Guardian Name (Printed) _____