

# Rochelle Park Recreation & Ice House Present After School 2014 Fall Ice Skating Lessons

FOR BEGINNER AND INTERMEDIATE SKATERS  
Open to all students K-8

Dates: **Friday-October 03,17,24,31 Nov.7**  
**5 WEEKS from 4pm to 5pm on Fridays**

Time: **Lesson Time: 4:00-4:30 p.m. on private ice**  
**Practice Time: 4:30 -5:00 p.m. on private ice**

Cost: **\$75.00 per student for 5 Weeks**

Price includes

- Admission
- Skate Rental
- Half hour Lesson
- Half hour practice (Parents, siblings, friends may join the practice at a discounted rate).
- T-Shirt (*must be worn over your clothes during every lesson*)
- Helmet recommended

Register at ICE HOUSE

Contact Yvette 201-487-8444 ext 210

Email: Yvette@icehousenj.com

111 Midtown Bridge Approach, Hackensack, NJ 07601

DEADLINE FOR REGISTRATION\_Thursday- September 26, 2014

(Phone registration accepted with Credit Card) Checks payable to: ICE HOUSE  
Mail application with payment to Ice House 111 Midtown Bridge Approach, Hackensack,NJ 07601

**(Limited Registration! Sells Out Quickly! Please register early!!)**

Class# 100314

**Ice House After School ICE SKATING Lessons 100314**

**5 WEEKS- FRIDAYS-Oct 03,17,24,31 & Nov 7 / 4pm-5pm**

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

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

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ Zip \_\_\_\_\_

Beginner Skater \_\_\_\_\_ Intermediate Skater \_\_\_\_\_ Phone Number \_\_\_\_\_

Parents Name: \_\_\_\_\_ Email: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_ **Note: Helmet recommended & tee shirt provided**

**PARTICIPANT WAIVER AND RELEASE OF LIABILITY**

**(Must be signed or will not be permitted to attend)**

I acknowledge and assume all risks of injury associated with participation in the ICE HOUSE’S skating programs. I also agree that Midtown Bridge LLC d/b/a ICE HOUSE (“ICE HOUSE”), and 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 ICE HOUSE 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 ICE HOUSE program participant, including my child, and I, by the ICE HOUSE.

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, or 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 ICE HOUSE programs at any time proceeding, during, or after such program is in session.

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

SKATERS NAME (please print) \_\_\_\_\_

PARENTS NAME (please print) \_\_\_\_\_

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

**Register at Ice House**

**FEE: \$75.00 PER CHILD – All major credit cards accepted** (except Discover).  
Registration by phone with credit card payment. Make checks or money order payable to: “ICE HOUSE”.

Method of Payment: CASH: \_\_\_\_\_ CHECK - #: \_\_\_\_\_ cc# \_\_\_\_\_

Exp. \_\_\_\_\_ Name on the Card \_\_\_\_\_

**No Refunds**

**No Refunds**

