

Griffs IceHouse West Program Enrollment Form

CLICK ON FORM FIELDS AND FILL OUT. THEN: SAVE AND EMAIL TO sredman@griffswest
OR MAIL OR DELIVER TO ADDRESS BELOW

Mail To: Griffs IceHouse West, 4444 Holland Ave. Holland MI. 49424

Participants LAST Name: _____ Parent (s) Name: _____
Participants FIRST Name: _____ Emergency Contact: _____
Home Address: _____ Emergency Phone: _____
City: _____ Relationship: _____
Zip Code: _____ Home/Work Phone: _____ E-Mail Address: _____
Age of Participant: _____ Date of Birth: _____ Sex of Participant: _____

PROGRAM NAME: _____ PROGRAM LEVEL: _____

SESSION DATE / DAY / TIME: _____

PROGRAM COST :\$ _____ *USFSA FEE IF APPLICABLE ADDITIONAL \$15.00 TOTAL COST:\$ _____

We Accept Visa, Master Card, Discover Am. Ex., Cash or Check, Checks to be made out to Griffs Icehouse West.

Credit card # _____ Name on C.C. _____

Expiration Date _____ 3 Digit CVV on Card _____ *All participants need to be registered with either USA Hockey, or US Figure Skating Association. To register with USA Hockey (registration is free for ages 6 + under) please go to usahockey.com and click on MEMBERSHIP. Please include printed copy of membership confirmation with registration. For those who wish to register with USFSA Please include an additional \$15 per participant to total cost.

USA HOCKEY CONF # _____

PARTICIPATION AGREEMENT, RELEASE OF LIABILITY, WAIVER OF CLAIMS AND ASSUMPTION OF RISK

TO: Griffs IceHouse West, Holland Hockey, and their owners, officers, directors, agents, employees, and/or representatives:

ASSUMPTION OF RISK: I am aware that ice skating involves certain inherent risks, dangers and hazards which can result in serious personal injury or death. I am also aware that ice skating arenas contain potential dangers to the ice skating public. *As such, I hereby freely agree to assume and accept any and all known and unknown risks of injury while participation in ice skating activities. I further recognize and acknowledge that the risks inherent in the sport of ice skating can be greatly reduced by: taking lessons, abiding by the Skater Responsibility Code (now know as 'Your Responsibility Code') and using common sense.*

RELEASE AND WAIVER OF CLAIMS AGREEMENT: In consideration of allowing me to participate in the ice skating activities at the Arena, I hereby agree as follows:

TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against Griffs Icehouse West, Holland Hockey Assocn. and their respective owners, officers, directors, agents, employees, and/or representatives of the mentioned entities.

TO RELEASE the Arena from any and all liability for any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer, as a result of my participation in the activity described in this Agreement, due to any cause whatsoever, including negligence of breach of contract on the part of the Arena in the operation, supervision, design, or maintenance of the Arena.

ARBITRATION: In further consideration of allowing me to participate in the ice skating activities in the Arena, I hereby agree to submit to binding arbitration any and all claims which I believe I may have against the Arena arising from activities at the Arena. The arbitration shall be pursuant to the rules of the American Arbitration Association. The arbitrators shall apply the Federal Rules of Evidence to all proceedings.

Arbitration shall be commenced within one (1) year from the date on which any alleged claim first arose. Further, the arbitration shall be held in the town where the Arena is located, unless otherwise mutually agreed to by all the parties. The submission to the American Arbitration Association shall be unlimited and the arbitration award may be enforced by any court of competent jurisdiction.

BINDING EFFECT OF AGREEMENT: In the event of my death or incapacity, this Agreement shall be effective and binding upon by heirs, next of kin, executors, administrators, assigns and representatives.

ENTIRE AGREEMENT: In entering into this Agreement, I am not relying upon any oral or written representation other than what is set forth in this Agreement.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE ARENA AND THE LEAGUE.

By signing this document you may be waiving certain legal rights, including the right to sue.*

I have read, understand, and agree to comply with the terms and conditions listed above in the Holland Participation Agreement, Release of Liability, Waiver of Claims and Assumption of Risk

Signature of Participant _____

Signature of Parent or Guardian if Participant is a minor _____

Date _____