Skating Club of Hingham/Silver Blades 2022 FALL SKATING CONTRACT APPLICATION

ame of skater:		DOB:		
ddress:				
		Phone:		
mail:	USFS#:			
oach:	Cc	pach cell#		
	FALL SESSION – S	Sent 7 th thru Nov	28 th	
	Selections are not guarantee	=		
eck the session(s) you are co	ontracting. Each selection has	12 weeks:		
<u>Mondays</u>	<u>Wednesdays</u>	<u>Fridays</u>	<u>Saturdays</u>	
	3:20-3:50 PM	3:20-3:50PM	10:50-11:20AN	
3:50-4:20 PM	3:50-4:20 PM	3:50-4:20PM	11:20-11:50AN	
4:20-4:50 PM	4:20-4:50 PM			
RATE SCHEDULE FOR SC	OH/SB MEMBERS			
Rate for SCOH FIGURE SI	KATING MEMBERS ONLY			
30-min selection on any	given day \$15.00			
60-min selection on sam	ıe day: \$24.00			
90-min selection on sam	ne day: \$36.00			
Rate for HOCKEY/BASIC	MEMBER LESSONS (all 30 min or	nly sessions)		
30-minute sessions: \$15	.00			
PAYMENT				
	x 12 weeks @\$15.00 =			
	x 12 weeks @\$24.00 =			
# of 90 min Sessions _	x 12 weeks @\$36.00 =			
TOTAL PAID for FALL	Session \$			
RECIPROCAL MEMBER C				
(No 30 min sessions allo	wed)			
60-min session: \$26.00				
90-min session: \$37.00				
	(@SC-OfHingham)			
	(@SC-OfHingham) of each contracted session. T			

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

Skater parent/guardian agrees to abide by all the provisions set forth by The Skating Club of Hingham, and Bavis Arena, as well as all additional rules put in effect during the term of the membership.. KNOW ALL PEOPLE BY THESE PRESENTS that for and in consideration of the granting of permission to use any or all of the facilities, programs, equipment, etc. of the Skating Club of Hingham (SCOH), Inc., I do hereby indemnify and hold harmless the SCOH, the Mark Bavis Arena, inside the Mass Sports Complex, (MBA), all directors, officers, members, employees, agents, legal representatives, successors and assigns, of and from all liability, expenses, costs, damages and/or losses of any kind arising out of injuries or illness (Covid-19) to any person or persons (including death) or damage to any property of any kind whatsoever in connection with the use of the facilities, programs, equipment, etc. of the SCOH, and/or the MBA, which against the SCOH, the MBA, their directors, officers, members, employees, agents and/or legal representatives, their successors and assigns, any person ever had, now has or which the successors and assigns of such persons or any other persons hereinafter can, shall or may have for and by reason of cause, matter or thing whatsoever from the beginning of the world to the date of these presents and forever thereafter.

these presents and forever thereafter.		
Parent/Guardian Signature:		
Date:		
MEDICAL RELEASE AGREEMENT		
In times of medical emergency, if the SCOH is unable to reach a parent or guardian, I hereby grant the Skating permission to obtain required "Emergency Medical Treatment" on my child's behalf. I do hereby indemnify the so acting in my best interest from any loss per the provisions of the agreement as detailed in the section above effect for the duration of my contract in the Skating Club of Hingham unless cancelled by me in writing.	SCOH and thos	se individuals
Emergency Telephone Number: () Contact:		
IN WITNESS WHEREOF, and intending to be legally bound hereby, I have executed these Agreements this	day of	, 2022.
Signature: Parent or Legal Guardian.		