

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in HPP RINX. d/b/a The Rinx athletic/ sports events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist; 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 stated and customary terms and conditions for participation. If, however, 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, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE TOWN OF ISLIP AND HPP RINX., their officers, officials, agents and/ or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"). WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH or loss or damage to person or property WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

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

Parents or Skaters Signature

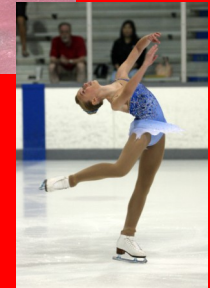
Date

The Rinx Total Skating Program
Hidden Pond Park
660 Terry Road
Hauppauge, NY 11788



FIGURE SKATING

Total Training Week



August 23-27, 2010

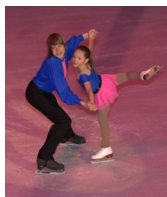
8:30—3:30 pm

Hidden Pond Park
660 Terry Road
Hauppauge, NY 11788
631/232-3222

*S U M M E R
F I G U R E S K A T I N G
T O T A L T R A I N I N G W E E K*

Whether you are a beginning figure skating enthusiast or an accomplished competitor, this fun, action packed week is for you. This full day program is designed to develop each skater as a complete athlete. Challenging the serious competitor, while offering a fun week of figure skating to the new enthusiast. Your day begins with an 8:30 am drop off, and ends with a 3:30 pm pick-up. Your week will include:

- ◆ Freestyle sessions organized by level
- ◆ On-ice clinics, *Dartfish™*, Jump Harness
- ◆ Off-ice conditioning, Pilates & Yoga
- ◆ Ballet, Modern & Theater dance classes
- ◆ Off-ice jump clinics, video, classroom
- ◆ Special Guests, Free swim and more!
- ◆ Lunch and snacks provided by *Timeout Café*
- ◆ Each group of athletes will have a *Team Leader* to assist them through their day.



Training for success

G r o u p s a n d P r i c e s

Group Descriptions Weekly

Group 5 Advanced Juvenile—Senior Level	\$399
Group 4 Intermediate No Test—Pre-Juvenile	\$399
Group 3 Advanced Basic Skills FS 1—No Test *Participated in Summer Freestyle Program	\$399
Group 2 Basic Skills Competitor Basic 6—No Test *Participated in Summer Freestyle Program	\$399
Group 1 New Enthusiast LTS Program—Beginner— Free Skate 3	\$349
Daily Option Available 2 Days	\$200
3 Days	\$300

D a t e s : A u g u s t 2 3 — 2 7 , 2 0 1 0

T i m e s : 8 : 3 0 a m — 3 : 3 0 p m

* See us if you need early drop off or late pickup

**T h e r e w i l l b e N O m a k e - u p s ,
c r e d i t s o r r e f u n d s f o r d a y s
m i s s e d d u e t o i l l n e s s , f a m i l y
m a t t e r s , h o m e s i c k n e s s o r
i n j u r y .**

**Summer Figure Skating
Total Training Week
August 23-27, 2010**

Check box		Price
<input type="checkbox"/>	Group 5 (Juvenile—Senior)	\$399
<input type="checkbox"/>	Group 4 (No Test—Pre-Juvenile)	\$399
<input type="checkbox"/>	Group 3 (Advanced Basic Skills)	\$399
<input type="checkbox"/>	Group 2 (Basic Skills Competitors)	\$399
<input type="checkbox"/>	Group 1 (New Enthusiast)	\$349
<input type="checkbox"/>	2—3 Day Option = \$100 per day x ___days = \$ _____	
	M T W R F	Total: _____

Highest MIF Passed	Highest FS Passed	Age	DOB	M/F
Name _____				
Address _____				
City _____		State, ZIP _____		
Home Phone _____	Work Phone _____	Cell Phone _____		
Emergency Contact _____	Telephone _____	Cell Phone _____		

Medical Emergency Permission

In the event that I or others listed as emergency contacts cannot be reached in an emergency, I here by grant The Rinx authority to act on my child's behalf.

Parent or Guardian Signature _____	Print Name _____	Date _____
Method of Payment		
<input type="checkbox"/> Check	<input type="checkbox"/> Visa	
<input type="checkbox"/> Cash	<input type="checkbox"/> MasterCard	
Credit Card # _____	Exp. date _____	CUV _____
Signature _____	Date _____	

Payment in full required by June 15, 2010

The Rinx Total Skating Program
Hidden Pond Park
660 Terry Road
Hauppauge, NY 11788

Phone: 631-232-3222
Fax: 631-232-3266

E-mail: cathryns@therinx.com



S U M M E R T O T A L T R A I N I N G W E E K