

The Hyannis Youth & Community Center Skating School ~ 2017 Summer Learn to Skate Registration Form

Participant Name: _____ Home Phone: _____
 _____ First Last
 Gender: M F Birthdate: _____ Grade: _____ School: _____
 Allergies: _____ Medications: _____

Primary Parent/Guardian: _____ Home Phone: _____
 Address: _____ Cell Phone: _____
 STREET & HOUSE # VILLAGE ZIP
 E-Mail address _____

Emergency contact: _____ Phone: _____
 Address: _____ Relationship: _____

LEARN TO SKATE	DAYS	RecTrac#	FEE W/ USFSA	FEE W/O USFSA
USFSA MEMBERSHIP **required**	July 2017- June 2018	605601-01	\$16 Res / \$16 NR	
*USA Hockey & MA Hockey not accepted				
Summer Tots 1/2 hr class only @5:15pm	Wed	111501-I	\$90 Res /\$100 NR	\$106 Res /\$116 NR
Summer Badge 1 @5:00pm	Wed	111501-A	\$90 Res /\$100 NR	\$106 Res /\$116 NR
Summer Badge 2 @9:00am	Wed	111501-B	\$90 Res /\$100 NR	\$106 Res /\$116 NR
Summer Badge 3 @9:00am	Wed	111501-C	\$90 Res /\$100 NR	\$106 Res /\$116 NR
Summer Badge 4 @9:00am	Wed	111501-D	\$90 Res /\$100 NR	\$106 Res /\$116 NR
Summer Badge 5 @9:00am	Wed	111501-E	\$90 Res /\$100 NR	\$106 Res /\$116 NR
Summer Badge 6 @9:00am	Wed	111501-F	\$90 Res /\$100 NR	\$106 Res /\$116 NR
Specialty Classes*	****Power & Edge,	Creative Freestyle,	And Intro Synchro	Combo class cost **
Individual Ice Dance @ 8:10am pre-req pre freestyle & higher	Wed	111501-Q	\$90 Res /\$100 NR	\$102 Res /\$112 NR
Power & Edge @ 8:00am pre-req badge 6 and higher	Tues	111501-02	\$73.34 Res & NR combo	Add \$16.00
Creative Freestyle @ 10am currently in pre free or higher	Wed	111501-03	\$73.34 Res & NR combo	Add \$16.00
Intro to Synchro @ 8:00am pre-req badge 6 and higher	Thurs	111501-01	\$73.32 Res & NR combo	Add \$16.00

The undersigned parent or guardian of _____, a minor, does hereby consent to his/her participation in the voluntary Town of Barnstable Hyannis Youth & Community Center Program indicated on this form and do forever RELEASE, acquit, discharge, and covenant to hold harmless the Town of Barnstable, a municipal corporation of the Commonwealth of Massachusetts, and its successors, departments, officers, employees, servants and agents, of and from any and all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which I may now or hereafter have as the parent or guardian of said minor, and also all claims or right of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting or to result from his/her participation in the Town of Barnstable Hyannis Youth & Community Center Program; FURTHERMORE, I hereby claim for damages, compensation or otherwise on the part of said minor growing out of or resulting from injury to said minor in connection with his/her participation in the Town of Barnstable Hyannis Youth & Community Center voluntary activities or programs, and to INDEMNIFY, reimburse or make good to the Town of Barnstable or its successors, departments, officers, employees, servants and agents any loss or damage or costs, including attorneys' fees, the Town of Barnstable or its representatives may have to pay if any litigation arises from said minor's participation in said recreation program. Parent/guardian signature also grants permission to the Town of Barnstable to videotape, photograph, make a voice recording or motion picture of their child(ren) relevant to this assigned program to be used in connection with any aspect of the Town of Barnstable community channels, program flyers and/or HYCC announcement monitors. Refunds are not issued on or after the start date of any program. Refunds issued before the start date of any program will be less a \$10 administrative fee.

THIS WAIVER MUST BE SIGNED IN THE PRESENCE OF A RECREATION OR HYCC DIVISION EMPLOYEE

Signature of Parent or Guardian _____ Date _____ Relationship to Applicant _____

THIS FORM MAY NOT BE ALTERED

Witness Signature (HYCC/Recreation Employee Only) _____ Amount Paid \$ _____ Check/MO # _____

Credit Card _____ Visa / MC _____ Exp Date _____ Security Code _____ Zip Code _____