

WAIVERFORM

In consideration of being allowed to participate in any way in Mount Clemens Ice Arena programs, related events and activities, the undersigned acknowledges, appreciates and agrees that:

1) The risk of injury from the 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 this risk, the risk of injury does exist; and 2) I KNOWINGLY AND FREELY ASSUMES ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assumes 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 instructor immediately; and 4) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS, CITY OF MOUNT CLEMENS, its elected officials, officers, employees, ANDRT Arena Management, LLC., their officers, instructors, 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 HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant's signature and date signed

FOR PARTICIPANTS OF MINORITY AGE (Under Age 18 at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and for myself, my heirs, assigns and next of kin, I do also release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above. EVEN IF ARISING FROM THEIR NEGLIGENCE.

Parent/Guardian's signature and date signed

Make check payable and mail to:

Mount Clemens Ice Arena
200 N. Groesbeck Hwy.
Mount Clemens, MI 48043

POLICIES

- * 100% refund will be given before the first day of your class should you need to cancel.
- * 50% refund will be given after the first class of each session. No refunds will be issued after the first week of class.
- * The arena reserves the right to cancel or rearrange any class in accordance with enrollment.
- * Enrolled skaters may attend a maximum of one (1) make-up class per session.
- * Students may obtain make-up vouchers from their instructors.
- * Vouchers will not be issued until after an absence.



For more
information, please e-mail
Mindi Priskey at
mindi@mountclemensicearena.com

JOIN THE FUN!

SUMMER PUBLIC SKATING

Mon/Wed/Fri - 12-12:50 pm (\$3)
Sun - 2-3:50 pm



Adults-\$5; Students/Youth/Seniors-\$4.50
Skate Rental-\$3



200 N. Groesbeck Hwy.
Mount Clemens, MI 48043

SUMMER 2019

LEARN-TO.

MOUNT CLEMENS ICE ARENA

SKATE

July 10 -
August 29

Deadline: Mon., July 8



REGISTRATION BROCHURE

586-307-8202

200 N. Groesbeck Hwy.
Mount Clemens, MI 48043
www.mountclemensicearena.com

