



North Shore Rink Management

2010 GRAF RINK FREESTYLE – SERIES ONE

September 7th – December 30th

No Skating: 11/25

Merrimack Valley SC members will receive priority until August 24th. Non-members will be allowed to contract ice after August 24th and only until space no longer permits. After September 9th skaters will pay the walk-on fee for ice and will not be eligible for the contracted price.

**Tuesday 4-5pm, 5-5:50pm
Thursday 2:50-3:40pm, 3:40-4:40pm, 4:50-5:50pm (NO SKATING 11/25)**

This ice is available to figure skaters who are receiving private lessons and/or taking part in practice sessions. Skaters may do Dance and Moves on all sessions offered. It is recommended that each skater has passed at least the USFS Basic 3 level before they use this ice. Please contact the Skating Director, Nikki Roberts, for information regarding which session would be most appropriate for your skater. Nikki may be contacted in order to find a private coach. Coaches who are interested in teaching on this ice (and Public Skating) must be approved by North Shore Rink Management. Applications to coach at Graf Rink may be obtained in the front office.

A 50% deposit is due with your registration. Your final payment is due no later than October 28, 2010. **Please note that there will now be a 5% finance charge applied to all late balances each week past the due date.** Skaters will not be allowed to contract future sessions until their balances are paid in full. Skaters must check in with Nikki before taking the ice. As a courtesy, please call the rink ahead of time if you will be missing a session. There will be a limit of 20 contracted skaters allowed on each session. Walk-on skaters will be allowed if space permits due to cancellations and will be charged an additional \$2 per each session skated. Skaters must pay for walk-on sessions before they get on the ice. There will be no exceptions to this rule and no bills for walk-ons will be sent. Checks should be made payable to MVSC (Merrimack Valley Skating Club) and, if paying with cash, exact change is greatly appreciated.

Please mail application, waiver and 50% deposit to:

Graf Rink Freestyle
Henry Graf Rink
28 Low St.

Newburyport, MA 01950

Checks should be made payable to MVSC (Merrimack Valley Skating Club). Cash will be accepted if paying in person at the rink. You may also pay with your Visa or MasterCard (noted on registration form).

PLEASE NOTE:

There will be no confirmations sent. You will be notified with any changed information. All schedules are subject to change depending on enrollment. There will be no refunds or make-ups given due to your own cancellations or conflicts. Refunds will only be granted for medical or family emergency situations. A doctor's note must be provided for medical refunds. Your 50% deposit and completed waiver must accompany your registration. The final balance must be paid no later than October 28, 2010. **There will be a 5% finance charge applied to all late balances each week past the due date.** Skaters will not be allowed to contract future sessions until their balances are paid in full. Skaters are not allowed to switch one session for another or trade spaces with another skater.

UPCOMING EVENTS!

Sunday, December 5th 4pm: Winter Exhibition & Family Skate. Sunday, April 3rd 4pm: Spring Show
More information will follow shortly!

**Graf Skating Rink - 28 Low St., Newburyport, MA 01950 / Janas Skating Rink - Douglas Rd., Lowell MA 01852
Graf Rink - Phone (978) 462-8112 - Fax (978) 462-1991-www.grafrink.com**

2010 Graf Rink Freestyle – Series One Registration Form

Skater Name:		
Full address:		
Phone #:		
Email address:	USFS #:	Home Club:
Age:	Date of birth:	
Highest skating level passed: Moves:	Freestyle:	Basic Skills:
Skating coach name:		Phone #:
Parent names & phone #'s:		
Emergency contact name & phone #:		

Please check the session(s) you would like to contract:

TUESDAY September 7th – December 28th

- 4-5pm Freestyle (60 min.) \$15 x 17 weeks = \$255
 ½ of 4-5pm Freestyle (30 min.) \$8 x 17 weeks = \$136
 5-5:50pm Freestyle (50 min.) \$14 x 17 weeks = \$238
 ½ of 5-5:50pm Freestyle (25 min.) \$7 x 18 = \$126

THURSDAY September 9th – December 30^h (NO SKATING 11/25)

- 2:50-3:40pm Freestyle (50 min.) \$14 x 16 weeks = \$224
 ½ of 2:50-3:40pm Freestyle (25 min.) \$7 x 16 weeks = \$112
 3:40-4:40pm Freestyle (60 min.) \$15 x 16 weeks = \$240
 ½ of 3:40-4:40pm Freestyle (30 min.) \$8 x 16 weeks = \$128
 4:50-5:50pm Freestyle (60 min.) \$15 x 16 weeks = \$240
 ½ of 4:50-5:50pm Freestyle (30 min.) \$8 x 16 weeks = \$128

\$ 5.00 ADMINISTRATIVE FEE
\$ TOTAL AMOUNT DUE (INCLUDING ABOVE ADMINISTRATIVE FEE)
\$ 50% DUE WITH REGISTRATION

Volunteer / Community Service: I would like to volunteer my time during Tiny Tots on:

Wednesday from 2-2:50pm Thursday 2-2:50pm Thursday 6-6:50pm
 Sunday 4-4:45pm Sunday 5-5:50pm

Check or money order enclosed. Checks should be made payable to MVSC (Merrimack Valley Skating Club).

Please bill my VISA or MC the amount of \$ _____ : **Account #:** _____
 (Discover and American Express will not be accepted.) **Expiration Date:** _____

Cash will be accepted if paying in person at the rink.

Please mail application, waiver and 50% deposit to:
 Graf Rink Freestyle
 Henry Graf Rink
 28 Low St.
 Newburyport, MA 01950

I understand that I am responsible for all ice payments and that my final balance is due no later than October 28, 2010. I understand that there will be a 5% finance charge applied to all late balances each week past the due date. I understand that there will be no refunds or make-ups given due to my own cancellations or conflicts. I understand that refunds will only be granted for family or medical emergency situations. I understand that a doctor's note must be provided for medical refunds. I understand that no confirmations will be sent and that all schedules are subject to change. I understand that I am not able to switch sessions or trade spaces with another skater. I understand that the Graf Rink, its employees and coaches are not responsible for lost or stolen items. I have read this information and agree to all terms listed.

Signature
 (Parent or guardian signature if the skater is under 18 years of age.)

Date

For office use only:

Deposit: _____ Info: _____ Balance due: _____

North Shore Rink Management Merrimack Valley Skating Club

ASSUMPTION OF RISK AND COMPLETE RELEASE

2010-2011 Freestyle Ice

Participant Name _____

Street Address _____

City, State, Zip _____

Phone Number _____

Email _____

In consideration of permission to use, today and on all future dates, the property, facilities and services (Facilities) of Graf Skating Rink in Newburyport, MA, I, the undersigned (Parent/Skater), hereby expressly agree:

- 1.) That skating is a participation sport and I am fully aware of the risks and hazards involved in or arising from my use or presence upon the facilities. I hereby assume any and all risks involved in or arising from my use of our presence upon the facilities, including, without limitation, the risks of bodily injury resulting from collision between myself and another person or a stationary object or the negligent or deliberate act of another person:
- 2.) To release NSRM and/or MVSC and all of its successors, assigns, affiliates, officers, directors, employees and agents from, and agree not to sue any or all of them on account of or in connection with any claims; causes of action, injuries, damages, costs or expenses arising out of Skater's use of or presence upon the Facilities, including, but not limited to, those based on bodily injury, whether or not caused by the negligence or other fault of NSRM and/or MVSC.
- 3.) This release shall be binding upon my heirs, administrators, executors, assigns and legal representative.
- 4.) To waive the protection afforded by any statute or law in any jurisdiction whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise, which the person giving the release does not know or suspect to exist at the time of executing the release.
- 5.) If I ignore this agreement and file suite, I will be held responsible for all attorney fees and court costs incurred by NSRM and/or MVSC.
- 6.) I have read and understand this agreement. I understand that by signing this agreement I surrender valuable rights, including, but not limited to, my right to sue. I do so waive voluntarily.

Signature _____ **Date** _____

(Parent signature if participant is under the age of 18.)