



Weston Skating Club

www.westonskate.org

Email: mail@westonskate.org

781.893.1603

2009-2010 MEMBERSHIP FORM

Please Choose:

Family Membership \$60.00 _____ or Individual Membership \$40.00 _____

Only Weston residents and Town employees may be members. *Membership is required for Learn To Skate and hockey programs.

Membership Information: Please list all family members and ages (if under 18).

Address: _____ Town _____ State _____ Zip _____
Phone: _____ Cell _____ Office _____
Email address/es (print clearly): _____

General Information: Open Skating takes place on Sundays from 4pm - 6pm. It will begin November 22, 2009 and end February 28, 2010. Information regarding any added days for school vacation skating can be found on the website at www.westonskate.org as it becomes available. Open Skating is free to members. A fee of \$5.00 per guest (up to 3 per family) will be charged. In the event of bad weather or to see if a skating session is cancelled due to any unforeseen circumstances, call the 24-hour hotline at the Weston Recreation Department at 781-529-0203 for information. *Non-residents may be permitted to join hockey or Learn To Skate programs at the non-member cost if space is available.

Rules and Sugestions: For protection, all skaters should wear a helmet when on the ice. For children, helmets are mandatory during the Open Skate sessions. Ice hockey or ice skating helmets are highly recommended. An adult responsible for skaters under 18 years of age must stay in the rink while the child/ren are skating. Skaters must skate in the direction of the flow of skaters. Skaters may be asked to reverse direction during a skating session.

Waiver: I understand that ice-skating and ice-skating related activities can be dangerous to me, my guests and my children, either on the ice-skating surface or in and around the ice skating facility at the Rivers School in Weston. I recognize and understand that there is risk of severe injury and or death in all ice skating associated with participating in Weston Skating Club ice-skating classes, programs and Open Skate. In so doing, I assume full responsibility for any and all risks to the above-named participant(s), including myself and guests and agree to release and hold harmless Weston Skating Club, its officers, employees, volunteers and agents for any loss or damage to personal property and for any personal injury or death that may arise from participation in any program (including Open Skate) or class offered by the Weston Skating Club.

Print Name _____ Signature _____ Date _____

Refund Policy: No refund after December 15th, 2009. Please make check payable to: Weston Skating Club and mail to or drop off at Weston Recreation Dept., 20 Alphabet Lane, Weston, MA 02493

Revised 9/15/09