



Parent/Volunteer Detail Form (& Out of Club Skaters/Coaches)



(please fill in all blanks below)

Name: _____ If Volunteer give club skater name : _____

Address: _____

Postal Code: _____

Phone: _____

 Parent Volunteer Coach Out of club skater

Email: _____

Club: _____
SC# skater & coach : _____

Note:(medical, etc) _____

- HHSC Assumption of Risk and Waiver** (Once for the season, hand in on first day, available on website, register.hhskatingclub.com)
- Attend Mandatory Parent/Coach/Adult Skater Info Meeting** (via ZOOM, Dates and Times available at register.hhskatingclub.com, bottom of page)
- Health Screening Questionnaire Form** (hand in 1-Fall, 1-Winter, daily 1 hour prior to session, verbal check at check in, available on wbsite, register.hhskatingclub.com)

Huntington Hills Skating Club Waiver

By my participating in this activity, I consent to the known and foreseeable physical risks inherent in the sport of figure skating and ice skating. These risks include but are not limited to: travel to and from the arena, ice conditions, equipment failure, falls, collisions with other participants and/or instructors, and facility conditions. In assuming these risks, I, the undersigned, forever release myself, my heirs, and any persons acting on my behalf, the Huntington Hills Skating Club, and/or Huntington Hills Community Association, and/or Vivo, and/or Skate Canada-Alberta/NWT-Nunavut Section, and its directors, employees, volunteers, coaches, officials, instructors, independent contractors, agents and sponsors, from any claim arising from any illness or injury to my person as a result of my participation in this activity. As a participant in this activity, and/or a parent/guardian of said participant, I agree to behave in a manner that demonstrates good sportsmanship, showing respect for all participants, instructors and those affiliated with the Skating Club. Personal information provided on registration form is protected under the authority of the Alberta Freedom of Information and Protection of Privacy (FOIP) Act. It will be used to facilitate your enrolment, administer our skating programs, and provide contact information that will be used to notify you of other skating programs and events. This membership information will be shared with Skate Canada for registration, statistical, and program development purposes.

Signature of: _____
(Parent/Guardian)

Date: _____

Print name: _____

Photo Release Agreement

This confirms the agreement between you and Huntington Hills Skating Club (HHSC) regarding your participation in approved HHSC activities in which you may be photographed or videotaped (the property) from time to time. For valuable consideration received, you hereby irrevocably grant the HHSC perpetually, exclusively, and for all media throughout the world (including print, non-theatrical, home video, CD_ROM, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footage taken of you as a result of your participation in approved activities of HHSC. You hereby agree that you will not bring or consent to others bringing claim or action against HHSC on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on you, violates any other right whatsoever, including, without limitation, rights of privacy and publiciy. You hereby release HHSC, its directors, officers, successors and assigns from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that you may hereafter have against HHSC in connection with. This agreement shall not obligate HHSC to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. HHSC shall have the right to assign its rights hereunder, without your consent, in whole or in part, to any person, firm or corporation.

Signature of: _____
(Parent/Guardian)

Date: _____

Print Name: _____

Signature of: _____
(Witness to all above)

Date: _____

Print Name: _____