

Skaters Name (Please Print)

Parent or Guardian name if under 18 (Please Print)

Waiver and Release

I, the undersigned, hereby acknowledge that I have voluntarily applied to participate in or if I am the parent or legal guardian, I have applied to place my child or minor for which I am responsible, in the Learn to Skate Cincinnati, LLC Program at Sports Plus or South Metro. By enrolling myself or my child or minor, I represent that I, or my child or minor am/is physically fit and am aware of no medical or health reasons why I/he/she should not participate in the activities that take place during the 2007/2008 skating season (September 2007 to August 31, 2008) of the Learn to Skate Cincinnati, LLC Program and that the following is a list of all my child or minor's health conditions:

_____ Initial
I am aware that participation in the Learn to Skate Cincinnati Program at Sports Plus by myself or my child or minor will result in the engagement of physical activities, and am voluntarily participating in these activities with the knowledge of the danger involved and hereby agree to accept any and all risks of injury or death.

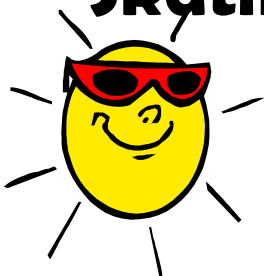
_____ Initial
As lawful consideration for being permitted by Learn to Skate Cincinnati and MOI Operations, Inc., d/b/a Sports Plus Cincinnati, South Metro Ice N In-line or one of it's affiliated organizations to participate in these activities and use their facilities, I hereby agree that I, on behalf of myself or my child or minor, my or their heirs, distributees, guardians, legal representatives and assigns will not make a claim against, sue, attach the property of, or prosecute Learn to Skate Cincinnati and/or its agents officers or directors or MOI Operations, Inc., d/b/a Sports Plus Cincinnati, South Metro Ice N In-line, and or any of its affiliated organizations and/or its agents officers or directors for injury or damage resulting from negligence or other acts, howsoever caused, by any employee, agent or contractor of Learn to Skate Cincinnati, LLC or MOI Operations, Inc., d/b/a Sports Plus Cincinnati, South Metro, its affiliates, as a result of my participation in the Learn to Skate Cincinnati or Dayton Program.

I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and both Learn to Skate Cincinnati, South Metro Ice N In-line, and Sports Plus Cincinnati and its affiliates, and have signed of my own free will.

Date: _____

Signature: _____

Summer Figure Skating Camp



Summer Skating Camp Snowplow - Free Skate Levels

5 different weeks to choose from

Three weeks at Sports Plus in Cincinnati

Two weeks at South Metro in Dayton

See dates and times

Inside brochure



SK8

GR8



Call Denise Mackey at
(513) 759-4259
for more information.

Www.learntoskatecincinnati.com

Www.learntoskatedayton.com

Learn to Skate
Denise Mackey
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