



RMRENEGADES HOCKEY TOT - LEVEL 1

MITE DEVELOPMENT HOCKEY



Class location:

West Meadows Ice Arena
3939 Winnetka Ave, R.M.
(847) 398-2700

Nelson Sports Complex
3900 Owl Drive, R.M.
(847) 818-3210

Link to online registration at:

rmrengadeshockey.com

Submit registration form to West Meadows:

Email: wmregistration@rmparks.org Fax: (847)870-5334

NOTE: Skates & helmet (with a cage) are required for Hockey Tot class. Skates, helmets & hockey sticks are available for use at the rink (at no charge) when you come to class. Gloves/mittens are also required. We recommend skaters come dressed in warm clothing.

HOCKEY TOT CLASSES All the same features of the RMPD Learn to Skate class, with a bit of hockey flare, Hockey Tot class will put beginner skaters on track for our hockey program. First time skaters will learn: proper way to fall, marching while standing & moving, swizzles, push & glide and two foot glide. Basic hockey activities such as playing with pucks and shooting will be incorporated into the end of each class. Typical ages 3-8 years, but not limited. No experience necessary!

Use Code 20-7110 to Register for Fall Hockey Tot Classes

✓	Day	Time	Location	Dates	Fee
<input type="checkbox"/>	Mondays	1:30-2:00p	Sports Complex	9/16 - 12/9	\$85
<input type="checkbox"/>	Tuesdays	10:00-10:30a	West Meadows	9/17 - 12/10	\$85
<input type="checkbox"/>	Wednesdays	1:30-2:00p	West Meadows	9/18 - 12/11	\$85
<input type="checkbox"/>	Wednesdays	5:10-5:40p	Sports Complex	9/18 - 12/11	\$95
<input type="checkbox"/>	Fridays	4:10-4:40p	West Meadows	9/13 - 12/13	\$85
<input type="checkbox"/>	Fridays	4:45-5:15p	West Meadows	9/13 - 12/13	\$85
<input type="checkbox"/>	Fridays	5:20-5:50p	West Meadows	9/13 - 12/13	\$95
<input type="checkbox"/>	Saturdays	9:30-10:00a	West Meadows	9/14 - 12/14	\$95

*** IMPORTANT DATES *** No Classes Nov 1st & 2nd and Nov 25th - 30th

Parents are welcome to help out on the ice after completing the "Parent On-Ice Waiver" (ask us for one!). All parent helpers must wear a helmet & skates while on the ice.

HT Class 1	\$
HT Class 2 (\$10 Multi-Class discount)	\$
Total Due	\$
Amount Paid	\$
Balance Due	\$

Player's name: _____ Birth date: ___/___/___ Today's date: ___/___/___

Address: _____ City: _____ Zip: _____

Phone: () _____ E-Mail: _____

Mother's name: _____ Fathers name: _____

Make checks payable to: "ROLLING MEADOWS PARK DISTRICT" or fill out the credit card information below.

Payment type: CASH CHECK # _____ CREDIT CARD Visa M/C AMEX Discover

Credit Card # _____ Exp Date: _____ Sec Code: _____

Credit Card Signature: _____

Signature Required

For Office use only: Waiver signature on back

PARTICIPATION WILL BE DENIED WITHOUT SIGNED WAIVER ON BACK OF THIS FORM



RMPD HOCKEY PROGRAM WAIVER & RELEASE

IMPORTANT INFORMATION

The Rolling Meadows Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Rolling Meadows Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program must recognize that there is an inherent risk of injury when choosing to participate in recreational activities.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Hockey is a sport intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including but not limited to head/brain injury, cervical spine injury (including paralysis) and death. All hazards and dangers cannot be foreseen. The very nature of the game of hockey is hazardous and risky, including but not limited to being tripped, body-checked, cross-checked with the stick, hit with a slash, a high stick, or a thrown stick, going head first into the boards, getting pushed or checked from behind, being cut by a skate blade, colliding with goal posts, being hit by a stick, puck, or other player's protective equipment, elbowed in the head or face, collisions with other players and stationary objects, poor officiating, injuries caused by failure to wear adequate protective equipment, inadequate playing conditions, defective equipment, imperfections in the ice, failure in supervision or instruction, unsportsmanlike conduct, and all other circumstances inherent to sport of hockey. In this regard, it is impossible for the Rolling Meadows Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Rolling Meadows Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant's Name (please print)

Parent/Guardian Signature

Today's date: _____

PARTICIPATION WILL BE DENIED

if the signature of adult participant or parent/guardian and date are not on this waiver.