



# Buffalo Speed Skating Club

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Holland, NY 14080  
716-553-7661

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www.buffalospeedskating.org

## Learn to Speedskate Program Waiver

I acknowledge that, as in all sports and exercise, there is an element of risk and that I am physically and medically capable of participating in skating activities. In consideration of the acceptance of my application and permission to participate in the Learn to Speedskate Program, and in any of the Buffalo Speed Skating Club events, activities, or training sessions.

I myself, my heirs, executors, administrators, successors, and assigns RELEASE, WAIVE and FOREVER DISCHARGE the Buffalo Speed Skating Club, Northern New York Skating Association, It's organizers and coaches, US Speedskating, Cazenovia Ice Rink, Cazenovia Park Youth Hockey Association, Riverside Ice Rink, City of Buffalo, South Buffalo Community Association, Hasek's Heroes, The Northtown Center, Town of Amherst and all other associations, sanctioning bodies and sponsoring companies, and all their respective agents, officials, servants, contractors, representatives, and assigns of and from all claims, demands, damage costs, expense, actions, and causes of action, OF ANY KIND WHATSOEVER, whether in law or equity, in respect of death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise by reason of my participation in any event organized by the team, whether as a spectator, participant, competitor, or otherwise, whether prior to, during or subsequent to the event and notwithstanding the same may have been contributed to or by negligence of any of the aforesaid.

I further undertake to skate safely and wear protective equipment at all times. All skaters must wear an ANSI/SNELL certified helmet, cut resistant neck guard, knee pads and full fingered gloves.

I have read this waiver in its entirety, and fully understand its contents. Date: \_\_\_\_\_

Name: (please print) \_\_\_\_\_ Signature: \_\_\_\_\_

Name: (please print) \_\_\_\_\_ Signature: \_\_\_\_\_

Name: (please print) \_\_\_\_\_ Signature: \_\_\_\_\_

Name: (please print) \_\_\_\_\_ Signature: \_\_\_\_\_

Name: (please print) \_\_\_\_\_ Signature: \_\_\_\_\_

(Parent or guardian if any participant is a minor)