Town of Redwater **Recreational Skating Program Registration Form**

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Child Information:

Last Name: Gender: M Age: Medical/ Behavioral/Concerns:

First Name:

Parent/Legal Guardian Information:

		Work Phone:		Cell Phone:	
Email addres	ss:				
I reside in: Session Regi	Redwater istration	Sturgeon County	Thorhild County	Other	
LEVEL 1, Get Up and Go: Tuesdays, 5:30-6:00pm Get familiar with this slippery surface and learn how to get up, walk, glide, and stop.					
Session 1: September 26 to November 7, 2023 (no class October 10)					
Session 2: November 14 to December 19, 2023					
LEVEL 2, Building Balance and Control: Wednesdays, 5:30-6:00pm					
Build balance and improve control during forward, backward, turning, and stopping movements.					
Session 1: September 27 to November 8, 2023 (no class October 11)					
Session 2: November 15 to December 20, 2023					
Is your child	new to skating	or skating lessons? Yes	Νο		
If no, how m	nany skating les	son sessions has your child	had?		
-		o and Video Consent Form is additional form as a part		Redwater Yes	No
Program Red	quirements:				

I understand and agree to ensure that either I myself (parent) or a designated guardian will be in the arena stands during the entire class. I understand that my child must wear a CSA approved hockey helmet in order to participate in the program, and that shin or knee pad protection is recommended. Please initial

LIABILITY AND PERSONAL INFORMATION WAIVER

The information on this form is being collected for the purpose of a municipal operation or activity under the authority of the Freedom of Information and Protection of Privacy Act, Section 33 (c). This information will be used at the discretion of the Town of Redwater and will be released to the contractor facilitating the program referred to on this form. For more information contact: FOIP Coordinator, Town of Redwater, Box 397, Redwater, Alberta, T0A 2W0, 780-942-3519.

Under Section 38 of the Freedom of Information and Protection of Privacy Act. Municipalities must protect the personal information it collects by making reasonable security arrangements against such risks as unauthorized access, collection, use, disclosure or destruction. Also, Municipalities must comply with Sections 39 and 40 when using and disclosing personal information.

_, have informed myself of any and all risks that could take place due to my participation or my child's participation with the program and hereby release the Municipality or Agency, its employees, instructors, agents and volunteers from any claim for loss, injury or damage to person or property either directly or indirectly, from the attendance, including participation in any activity scheduled or unscheduled, including travel to and from any location for myself or my children. I acknowledge having read and understood this release and accept the terms therein.

Signature of Parent/Legal Guardian: _____ DATE: _____