



# EXTREME SKATING CLUB EDGE

## Club Office:

Londonderry Arena  
14528-66 Street  
Edmonton, AB T5C 3R7

## Contact Us:

Email: [extreme.edge@shaw.ca](mailto:extreme.edge@shaw.ca)  
Phone: 780-456-6851  
Website: [extremeedge.ca](http://extremeedge.ca)

## Canskate Group Skating Lessons

Safety will be our priority. Lessons will be modified to adhere to current Covid-19 safety protocols as outlined on our website.

**CANSKATE:** For children 4 years of age & older.

**PREREQUISITE:** Some skating experience. Skaters must be able to get up on their own in order to participate at this time. Trials can be arranged by contacting the club prior to the program commencing. Pre-canskate will be combined with Canskate.

Coaches will wear masks while conducting classes.

All participants and their parents are required to wear masks while in the building. Skaters may remove masks during the lesson. All spectators are expected to practice social distancing in the stands.

**Limit 1 spectator per skater.** No siblings allowed.

Please arrive 10-15 minutes before class start time to complete check-in and put on equipment. Each skater must bring their own equipment.

Further information will be emailed upon registration.

## Registration:

- **Online** - [extremeedge.ca](http://extremeedge.ca), create family account, add participants
- **By phone** - 780-456-6851, Parent signature required on waiver at initial check-in.
- **In Person** - (By Appointment Only) Facility access at Londonderry Arena Office is very limited - Please use online or phone registration if possible.

## Required Equipment:

### Skates



Supportive ankle and laces recommended. Blades must be sharpened at store before going onto the ice.

### Hockey Helmet



CSA Approved. Must fit to skater's head. Bike helmets not permitted.

### Gloves or Mittens



Winter gloves. No fuzzy material - it sticks to the ice and doesn't come off.

### Skate Guards



Protects sharpening while walking off ice. Remove while storing skates in bag to prevent rusting.

## Recommended stores to purchase skates:

**United Sport & Cycle**  
7620 Gateway Blvd.

**Proskate**  
16972-111 Ave.

**Class Locations:**Londonderry Arena, 14528-66 Street, North Edmonton

**Fees:** \$44 Skate Canada Annual Membership Fee per child, plus class fees listed below

**Please Note:** No refunds or make-up classes available. Schedule subject to change.  
No classes on dates covered by a black square ■.  
Due to Covid-19 physical distancing safety precautions, skaters must be able to get up on their own in order to participate.

**Skate more and save! Receive 15% discount off the second class if a skater registers for twice per week.**

**October - December 2020**  
All Classes are at Londonderry Arena

Day of the Week	Class	Time	Dates	Class Fee
Sundays	CANSKATE	2:55-3:45pm	Oct 18, 25, Nov 1, 8, 15, 22, 29 Dec 6, 13, 20	10 classes = \$155.00
Mondays	CANSKATE	6:55-7:45pm	Oct 19, 26, Nov 2, 9, 16, 23, 30, Dec 7, 14, 21	10 classes = \$155.00
Tuesdays	CANSKATE	6:40-7:30pm	Oct 13, 20, 27, Nov 3, 10, 17, 24, Dec 1, 8, 15	10 classes = \$155.00
Wednesdays	CANSKATE	6:40-7:30pm	Oct 7, 14, 21, 28, Nov 4, ■, 18, 25, Dec 2, 9, 16	10 classes = \$155.00
Thursdays	CANSKATE	6:40-7:30pm	Oct 15, 22, 29, Nov 5, 12, 19, 26 Dec 3, 10, 17	10 classes = \$155.00

**Winter 2021 Classes: to be Announced**  
Check our website [ExtremeEdge.ca](http://ExtremeEdge.ca) for updates

# Group Skating Lessons Application Form

**Skater Information:**

Updated: Sept 22, 2020

Skater's name:	Skater's name:
Birth date (MM/DD/YY):	Birth date (MM/DD/YY):
Previous skating experience:	Previous skating experience:
Medical issues (if any):	Medical issues (if any):

**Parent / Guardian Contact Information:**

Name(s) of parent(s) or guardian(s):		
Ph: (780)		Cell: (780)
Address:		
City:	Prov:	Postal Code:
Email address:		
How did you find out about our program?		

<p><b>Select Session:</b></p> <input type="checkbox"/> October-December 2020 <input type="checkbox"/> Winter 2021	<p><b>Select Day(s) per week:</b></p> <input type="checkbox"/> Sundays <input type="checkbox"/> Mondays <input type="checkbox"/> Tuesdays <input type="checkbox"/> Wednesdays <input type="checkbox"/> Thursdays	<p><b>Annual Skate Canada Membership Fee Per skater:</b></p> <input type="checkbox"/> \$44.00 (Sept 2020 - Aug 2021) <input type="checkbox"/> Previously paid this season
		<p><b>Membership fee + Class fee = \$_____ x Number of Skaters _____</b></p>
<p><b>Select Level:</b></p> <input type="checkbox"/> Canskate <input type="checkbox"/> Parent & Tot <input type="checkbox"/> Adult		<p><b>Fee Total = \$_____</b></p>

**Payment: Forms will only be accepted with payment attached**

**Visa/Mastercard #** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**Expiry #** \_\_\_\_/\_\_\_\_ **CVV #** \_\_\_\_\_  
**Cheque #** \_\_\_\_\_ **Cash** \_\_\_\_\_

The EESC has my permission to publish my child's picture, results, and/or name for advertising, and displays and or any written acknowledgement on our website.

- Yes
- No

I, the parent or legal guardian of the participant, accept full financial responsibility for this application form. Membership fee (Skate Canada & EESC) is non-refundable. Refunds are only given with medical note or 1 week prior to commencement of start date by withdrawing from program. No refunds or credits will be issued unless the program is cancelled by the Extreme Edge Skating Club (EESC). Schedule is subject to change. In consideration of the benefits awarded to us by acceptance of this application, I agree to save and hold harmless and release EESC, all coaches and assistants, and any private or municipal rink of and from any and all claim rising from bodily injury and property damage sustained by the student. Further, I agree to abide by the Rules and Regulations of Skate Canada and the Extreme Edge Skating Club as set down by the Board of Directors. A Skate Canada annual membership (September 1 - August 31) is required to register in the class; therefore, the participant's name, birthdate, address, email, and phone number provided with the registration form is shared with our governing organization, Skate Canada, only.

Date:	Signature:	Staff Member:
	Print Name:	

# SKATE CANADA ASSUMPTION OF RISK AND WAIVER

**PLEASE READ CAREFULLY:**

## **1. ACKNOWLEDGMENT OF INHERENT RISK**

I understand that participation in skating, figure skating, and any other sporting activities listed in the enclosed appendix (hereinafter the "Sports Activity") is voluntary, and involves inherent risk during participation, including the risk of possible accidents, physical injury, or exposure to the COVID-19 virus or other infections or infectious diseases as a result of attending training, club events or competitive events. I freely accept and fully assume all such risks, dangers and hazards, including but not limited to personal injury, disease transmission, death, property damage or loss, resulting from my participation. I have carefully considered the risks involved, and I have full confidence that reasonable precautions will be taken to ensure the safety and well-being of myself (or my son/daughter/ward).

## **2. WAIVER**

I do for myself (or my child), and our respective heirs, executors, administrators, successors and assigns, hereby waive, release, and forever discharge Skate Canada and/or Skate Canada: Alberta-Northwest Territories/Nunavut Association (Skate Canada: Alberta-NWT/Nunavut Section), all Regions of Skate Canada: Alberta-NWT/Nunavut Section, Extreme Edge Skating Club, their officers, partners, agents, employees, servants, representatives, volunteers, coaches, officials, successors and assigns (the "Representatives") of and from any actions, causes of action, complaints, demands and claims or any recourse whatsoever ("Claims") that I have or may have in the future in any way connected with my (or my child's) participation in the Sports Activity contemplated herein, whether in law or in equity, in respect of personal injury, illness or disease transmission, loss of life, or property damage of any kind or nature, and I do hereby discharge the Representatives from any such liability. This includes negligence, breach of contract or breach of any statutory or other duty of care.

## **3. INDEMNIFICATION**

I further agree to fully indemnify and defend Skate Canada and/or Skate Canada: Alberta-NWT/Nunavut Section, all Regions of Skate Canada: Alberta-NWT/Nunavut Section, Extreme Edge Skating Club and any of their Representatives from and against any and all Claims brought against Skate Canada and/or Skate Canada: Alberta-NWT/Nunavut Section, all Regions of Skate Canada: Alberta-NWT/Nunavut Section, Extreme Edge Skating Club and any of their Representatives, including all related costs and expenses, and against any loss, costs, damages, or expenses which Skate Canada and/or Skate Canada: Alberta-NWT/Nunavut Section, all Regions of Skate Canada: Alberta-NWT/Nunavut Section, Extreme Edge Skating Club and any of their Representatives may sustain, suffer, incur, or be liable for resulting from, arising from, or in any way related to my (or my son/daughter/ward's) participation in the Sports Activity. I also agree and undertake not to make any claim or take any proceedings against the Representatives set out above, or any other person or corporation which might claim contribution or indemnity under the provisions of any statute or otherwise from the Representatives set out above.

## **4. SEVERABILITY**

The provisions of this Assumption of Risk and Waiver shall be deemed severable and if any provision or portion thereof is

held invalid, illegal or unenforceable for any reason, the remainder shall not thereby be invalidated, but shall remain in full force and effect.

**Acknowledgement:** I am aware of the nature and effect of this Assumption of Risk and Waiver and I fully understand all of the terms and conditions above. I understand that I have given up substantial rights by signing this Assumption of Risk and Waiver and I am signing it freely and voluntarily without inducement.

**Parent/Guardian:** I certify that I am the parent or legal guardian of the participant named below and that I am entitled to his or her custody and control. I understand the aforesaid inherent risks that could arise from these activities, I grant permission for my son/daughter/ward to participate in the Sports Activity and other activities incidental thereto and I execute this Assumption of Risk and Waiver on behalf of myself and my son/daughter/ward.

Participant's Name: \_\_\_\_\_ Date of Birth (D/M/Y): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Participant's Signature: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_ / \_\_\_\_\_

Parent/Guardian Signature(s): \_\_\_\_\_ / \_\_\_\_\_

Date (D/M/Y): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Appendix

#### *Additional Description of Sports Activity*

Please circle one of the programs:

Canskate/ Jr. Prep./ Star Skate/ Competitive Figure Skating/ Adaptive Skating

Print Name: \_\_\_\_\_