



15 Bridle Lane  
Westborough, MA  
508.366.1562 x236

## ICE RENTAL REQUEST FORM/Summer

Today's Date: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Name of Contact Responsible for Payment: \_\_\_\_\_

Contact Address: \_\_\_\_\_ Town: \_\_\_\_\_

CELL: \_\_\_\_\_ E-mail: \_\_\_\_\_

Day(s) and Time Preferred: \_\_\_\_\_

Alternative Day: \_\_\_\_\_

Earliest possible start time: \_\_\_\_\_ Latest possible start time: \_\_\_\_\_

Total # of hours requesting? \_\_\_\_\_ Ice Cut Needed? Yes No If Yes, when: \_\_\_\_\_

Ice will be used for (circle) Practice Game Clinic Other (explain)

Is admission being charged? If yes, how much? \_\_\_\_\_

Additional Comments: \_\_\_\_\_

Referee(s) Needed? \_\_\_\_\_ Scorekeeper Needed? \_\_\_\_\_

We do not guarantee we can provide Referee(s) and Scorekeeper. If we are able, you will be charged an additional cost.

Are all skaters' members of either USA Hockey or United States Figure Skating? Yes No

**DO YOU HAVE A CERTIFICATE OF INSURANCE?** Yes No

**IF NO, ALL SKATERS (including coaches, etc.) must sign and return a Liability Waiver before skating. (See page 2)**

ICE FEE: \$240 / 60 minute

- All ice renters will need to establish a **Crossbar** account. Invoice will be emailed once your ice request has been approved.
- ICE WILL NOT BE BOOKED UNTIL A 50% DEPOSIT HAS BEEN RECEIVED AND POSTED TO YOUR CROSSBAR ACCOUNT. NO REFUNDS OR CREDITS.
- Account Balance is due (4) Four weeks prior to ice rental start date. Failure to pay balance voids all ice sheets rented.

I UNDERSTAND THE PAYMENT POLICY AND UNDERSTAND ICE REQUESTED IS NOT BOOKED UNTIL MY PAYMENT HAS BEEN RECEIVED. I UNDERSTAND PAYMENTS ARE NON REFUNDABLE.

Signature (contact) \_\_\_\_\_ Date: \_\_\_\_\_

Print (contact) \_\_\_\_\_

EMAIL FORM TO: JoAnne Bliss [jbliss@northstaricesports.com](mailto:jbliss@northstaricesports.com)

**ASSUMPTION AND ACKNOWLEDGEMENT OF RISKS  
AND  
RELEASE OF LIABILITY AGREEMENT**

I, the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in the program is significant, including the potential for permanent paralysis, illness and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, or others, and assume full responsibility for my participation; and
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will bring such to the attention of the nearest official immediately, and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS, to the fullest extent permitted by law, **Northborough Youth Hockey Program, Inc. NorthStar Hockey, NorthStar Ice Sports, North Star Figure Skating Club**, their respective officers, officials, coaches, agents and/or employees, other participants sponsoring agencies, sponsors, advertisers and if applicable owners and lessors of the premises used to conduct an event (the "Releasees"), with respect to any and all liabilities arising from, related to, or incident to my involvement or participation in, with or on any programs, teams, or events offered, sponsored, held, hosted or managed by any of the Releasees, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES.
5. I give permission that photos of my son/daughter may be used in promotional materials (participant's name will never be used with these photos).

I HAVE READ ASSUMPTION AND ACKNOWLEDGEMENT OF RISKS AND RELEASE OF LIABILITY AGREEMENT AND FULLY UNDERSTAND IT'S TERMS. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X \_\_\_\_\_ Age: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
Signature (if over 18)

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE  
(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for the participant named below, do consent and agree to his/her release as provided above of all Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in or on any programs, teams, or events offered, sponsored, held, hosted or managed by any of the Releasees as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Organization: \_\_\_\_\_

Participant's name: (please print) \_\_\_\_\_

Parent's name: (please print) \_\_\_\_\_

X \_\_\_\_\_ Date Signed: \_\_\_\_\_  
Parent/Guardian's Signature

Emergency Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_