



Toronto Speed Skating Club Masters Camp
July 21st to 23rd, 2017

| SKATER INFORMATION | |
|--|--|
| Last Name | |
| First Name | |
| Age (as of June 30 th , 2017) | |
| Sex (M or F) | |
| Club | |
| 500m time | |
| E-mail | |
| Mailing address | |
| Phone - home | |
| Phone - work | |
| Emergency contact name | |
| Emergency contact phone | |
| Severe allergies (food, medication, or anything that will impact your participation in the camp) | |
| Number of previous Ellis Edge camps attended | |



Toronto Speed Skating Club Masters Camp July 21st to 23rd, 2017

Payment

The fee for the camp is \$350 per skater. Cheques are payable to the Toronto Speed Skating Club. **Please send the signed and completed registration form with the full payment to:**

Toronto Speed Skating Club
Masters Camp 2017
c/o Meryl Nelson
55 Third St
Etobicoke, ON
M8V 2X7

Forms that are incomplete or unsigned, or received without the full payment will not be considered. Post-dated cheques will not be accepted.

Registrations will be confirmed by e-mail. In the event that the camp is full, or cancelled due to insufficient registrations, you will receive a refund by mail.

Refund Policy

Full refunds will be granted to skaters withdrawing from the camp for medical reasons (a doctor's note is required) prior to May 1st, 2017. **Refunds will not be issued for withdrawals after May 1st, 2017.** All withdrawal requests must be submitted in writing to TSSCsummercamp@gmail.com

Waiver

I hereby, for myself, my heirs, executors, administrators and assigns, waive and release any and all rights and claims for damages I may have against Speed Skating Canada, the Ontario Speed Skating Association, the Toronto Speed Skating Club, Ellis Edge Inc., Susan Ellis, the City of Toronto, their agents, directors, officers or members, for any and all injuries suffered by me during the Masters Camp 2017. I hereby give the Toronto Speed Skating Club permission to post pictures, videos and event results of myself on the club's website, to the club's arenas, in the local newspapers and on photo and video sharing web sites. By signing below, you acknowledge that you have read and agree to the waiver and refund policy as outlined above.

| | |
|---------------------|--|
| Name (please print) | |
| Signature | |
| Date | |