

LEARN-TO-PLAY HOCKEY

EARLY SPRING 2015

March 9 - May 2 (8 weeks)

Registrations on or after March 8 will incur a \$10 administrative fee

Dublin Junior Jackets Schedule

	WED	THUR	FRI	SAT	COST
Hockey Class, Ages 5-10		6:00-6:50pm		11:00-11:50am*	\$135/\$118*
Hockey Class, Ages 18+		7:-00-7:50pm			\$135
Jr. Stingers, Ages 4-5			1:30-2:20pm**		\$118**
Hockey Skating 1	6:00-6:40pm 6:45-7:25pm				\$115

*No class March 21. Price reduced to reflect the shortened session.

**No Friday class March 20. Price reduced to reflect the shortened session.

Easton Junior Jackets Schedule

	TUES	WED*	THUR	SAT	COST
Hockey Class, Ages 5-10		6:00-6:45pm*		11:00-11:50am**	\$120*/\$101**
Hockey Class, Ages 11-17				10:00-10:50am**	\$101**
Hockey Class, Ages 18+		6:50-7:35pm*			\$120*
Jr. Stingers, Ages 4-5			1:30-2:20pm		\$135
Hockey Skating 1	6:00-6:40pm 6:45-7:25pm				\$115

*Wednesday classes are 45 minutes and carry a reduced price.

**No class March 21 and April 18. Price reduced to reflect the shortened session.

North Junior Jackets Schedule

	TUES	FRI	SAT	COST
Hockey Class, Ages 5-10	6:00-6:50pm		10:00-10:50am*	\$135/\$118*
Jr. Stingers, Ages 4-5		10:30-11:20am		\$135
Women's Hockey		9:30-10:30am		\$135
Hockey Skating 1			9:15-9:55am 10:00-10:40am	\$115

*No class April 18. Class price reduced to reflect the shortened session.

Please Note: Registrations on or after March 8 will incur a \$10 administrative fee

EARLY SPRING 2015 JUNIOR JACKETS ENROLLMENT

Parent Name:	Payment Method:				
Street:	MC	Visa	Discover	Check	Cash
City:	Card #:				
Phone:	Exp Date:	Name on Card:			
Email:	3 Digit Security Code:	Amount:			
Add'l Emergency Contact Name/Phone #:	Auth #:	Disc. Applied (circle one):			
	Check #:	DUB COUPON			

How did you hear about the Chiller?

Skater #1 Name:	female / male	Age:	B-date:	
Class Name:	Day/Time:			
Location:	Dublin	Easton	North	Amount:
Skater #2 Name:	female / male	Age:	B-date:	
Class Name:	Day/Time:			
Location:	Dublin	Easton	North	Amount:

Accident/Liability Release: I, or my son/daughter or child over whom I have legal custody, wish to participate in Chiller classes/activities organized by Chiller LLC. I agree to release Chiller LLC, COLHOC Limited Partnership, Ohio-Health Ice Haus, Nationwide Arena LLC, and/or their members, employees, agents, representatives, sponsors, affiliates and/or subsidiaries, from all claims, actions, causes of action or damages suffered by me or my son/daughter or child over whom I have custody for any loss or injury resulting from participation in the aforesaid classes/activities. I understand that by participating in a Chiller program, I or my child could be injured, die and/or suffer property damage. Regardless of any bodily injury, death or property damage sustained by me or my child from participating in a Chiller program, I agree not to sue, or allow others to sue on my behalf, Chiller LLC, COLHOC Limited Partnership, Ohio-Health Ice Haus, Nationwide Arena LLC, and/or their members, employees, agents, representatives, sponsors, affiliates and/or subsidiaries. I further agree to indemnify and hold harmless Chiller LLC, COLHOC Limited Partnership, Ohio-Health Ice Haus, Nationwide Arena LLC, and/or their members, employees, agents, representatives, sponsors, affiliates, and/or subsidiaries, from all claims, actions, causes of action, or damages brought by me or on my child's behalf by any other party stemming from participation in any and all Chiller activities. ****BY ENROLLING IN THIS CLASS, YOU AGREE TO AND UNDERSTAND THE RIGHTS WAIVED HEREIN. BY AGREEING TO THESE TERMS, YOU MAY GIVE UP LEGAL RIGHTS.****

READY TO ENROLL?

Don't miss out!

Register now online:

www.TheChiller.com/register

Can't enroll this time? Next session:
Spring 2015 - May 4-June 27, 2015

Employee Name: _____	Date: _____
Entered in Book: _____	Entered in Computer: _____
Comments: _____	