



**NORTH KINGSTOWN RECREATION
ROLLER SKATING TRIP, 5th GRADE
February 1st, 2021**

IF YOU PLAN TO ATTEND, YOU MUST PRE REGISTER ONLINE, there is a limited number of spots.
<https://nkrec.recdesk.com/Community>

The North Kingstown Recreation Department is organizing a roller-skating trip to the United Skates of America Rink
(438-4282, 75 New Road, Rumford, RI 02916)

. The rink has a large circular floor, state of the art lighting and sound systems, and a well-stocked concession area. **WE HAVE THE COMPLETE USE OF THE FACILITY. NO OTHER PROGRAM IS ALLOWED IN UNTIL WE LEAVE.** If you are interested in seeing what it has to offer go to www.unitedskates.com.

The facility is at least forty minutes from NK, it is a long time between meals so this year we have again arranged a price that includes a soda and pizza. Our time at Facility is 4:30 – 6:00. FEE is \$15.00

The skaters will be picked up and dropped off from the Community Center, 30 Beach Street, NK. Bus leaves CC at 3:30 and Bus returns to CC at 6:45. Parents, must be on time to pick up your skater. Parents MAY NOT drive an unregistered child to United Skates to meet us there.

The cost is **\$15.00**, which includes rink time, skates (or they can use their own), transportation, pizza and soda. Roller Blades are an additional \$5 to be paid at the rink. **PRE REGISTRATION IS MANDATORY.**

*** LASER GAME: \$5.00 EXTRA and *ROCK-CLIMBING WALL: \$5.00 EXTRA, BOTH ARE OPTIONAL ACTIVITIES! Your child will be responsible for their money for those activities.**

If any parents would like to chaperone, you are welcome

Please indicate below if you want to chaperone or email Kyle Bodington. You don't have to skate or ride the bus. You may drive your own car if your ears are not tuned to the soft sounds of today's music and children's riding the bus, CHAPERONES ARRIVE 15 MINUTES prior to departure, parents may have laughter. If to sit with their child if there are no extra seats (covid Bus guidelines)

If you have questions please call **268-1540** or e-mail kbodington@northkingstown.org

Maximum 25 students

KEEP TOP PORTION FOR YOUR RECORDS

ROLLER SKATING GRADE 5 Feb 1 2021



NAME _____ DATE OF BIRTH _____

ADDRESS _____ 028__ EMAIL: _____

PRIMARY PHONE: _____ CELL PHONE: _____

OPT IN FOR TEXTS? NO ___ YES ___ IF YES, Service Provide? _____

EMERGENCY CONTACT NAME AND NUMBER: _____

ANY MEDICAL PROBLEMS? _____

MALE () FEMALE () GRADE _____ TEACHER _____

CHAPERONE? NO ___ YES _____ NAME AND NUMBER _____ -- _____

NAME AND NUMBER OF PICK UP PERSON/S

**TOWN OF NORTH KINGSTOWN
RECREATION DEPARTMENT
100 Fairway Drive
North Kingstown, Rhode Island 02852
Phone (401) 268-1542**

**MINOR'S CONSENT TO PARTICIPATE
AND HOLD HARMLESS AGREEMENT AND RELEASE**

I, (Print Name of Minor's Parent or Legal Guardian)_____ state that

(Print Minor's Legal Name)_____ (hereafter referred to as "the minor") the minor wishes to participate in (Print Name of Event or Program)

_____ sponsored by the North Kingstown Recreation Department (the "Recreation Department").

The minor's parent(s) or guardian(s) understand that participation in the above event or program is VOLUNTARY and that the minor does not have to participate. It is understood that the event or program involves activities which could result in injury to the minor's person or damage to the minor's property, and that by participating, the minor's parent(s) or guardian(s) voluntarily accept and assume the risk of injury to the minor or damage to the minor's property and consent the minor's participation in the event or program.

It is understood that the Recreation Department DOES NOT provide any insurance coverage for the minor's person or property; and minor's parent(s) or guardian(s) acknowledge that they are responsible for the minor's safety and the minor's own health care needs, and for the protection of the minor's property.

In exchange for allowing the minor to participate in this event or program, the minor by and through the undersigned, agrees to release from liability, indemnify, and hold harmless the Town of North Kingstown, its agents, officers, and employees for any injury to the minor's person or damage to the minor's property which arises out of or occurs during or as a consequence of the minor's participation in the event or program, whether or not such injury or damage may have been caused, in whole or in part, by any negligence or want or care on the part of the Town of North Kingstown, its agents, officers, or employees.

This Hold Harmless Agreement and Release shall be binding upon the minor, the parent(s) or guardian(s), any successors in interest, and/or any person(s) suing on the minor's behalf.

The minor's parent(s) or guardian(s) understand that this document is complete unto itself and that any oral promises or representations made to them concerning this document and/or its terms are not binding upon the Town of North Kingstown, its officers, agents and/or employees.

PARENT OR LEGAL GUARDIAN MUST SIGN BELOW:

I, the undersigned, state that I am the parent or legal guardian of the minor whose name appears above. I understand that the above terms and conditions apply to said minor and to myself. I further understand that said minor cannot participate under ANY circumstances in the above specified event or program without parental consent and that the minor will not be allowed to participate without entering into this agreement. This document is binding on myself, the said minor, and any person suing on behalf of said minor.

BY INITIALING I AGREE TO THE UNRESOLVED USE OF MY CHILD'S NAME AND/OR LIKENESS (INCLUDING PHOTOGRAPHS, VIDEO TAPES, AND OTHER DEPICTIONS) FOR PUBLICIZING NORTH KINGSTOWN RECREATION ACTIVITIES AND EVENTS.

Minor's Name (PRINT):_____ Birth date of minor:_____

Home State of minor:_____ Today's Date:_____

Parent/Guardian Legal Name (PRINT):_____

Parent/Guardian Legal Name (SIGN):_____

[Type here]

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

North Kingstown Rec Programming has put in place preventative measures to reduce the spread of COVID-19; however, NK Rec **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **attending NK Rec Programming, being exposed to the public, could increase** your risk and your child(ren)'s risk of contracting COVID19



By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending NK Rec Programming and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NK Rec employees, volunteers, and program participants and their families even though North Kingstown Recreation is taking all possible precautions.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at NK Rec Programs or participation in NK Rec programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless NK Rec, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of programs, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any programming.

Signature of Parent/Guardian

Date

Print Name of Parent/Guardian

Print Name of Participant(s)

[Type here]