2017 University of Delaware High Performance Figure Skating Center
Summer Skating School Application Form

Weekly Summer Ice Package Contract
(26 June 2017 – 28 July 2017)
Application will not be processed unless ALL pages are completed

Skater’s Name______________________________________________________ □ Male □ Female Age_____

Address__________________________________________________________________________________________________________

City__________________________________________State______________Zip____________

Country (other than United States)____________________________________________________________________________________

Home Phone___________________________________________Cell Phone________________________________________________________

Email______________________________________________________________________________________________________________

Parent/Guardian Name__________________________________________Phone______________________________

Parent/Guardian Name__________________________________________Phone______________________________

Highest Test PASSED: Freestyle_______ Moves_________ Pairs_________ Dance_________

Weekly Summer Ice Package for weeks #1 - #5 is $225 per week and includes:
● Three pre-registered on-ice sessions per day MTWRF, SAME sessions every day
● Skater may only register for correct level sessions
● One pre-registered off-ice conditioning session per day MTWRF
● One pre-registered off-ice dance session per day MTWR

****Skater MUST arrange lessons with the coach(es) of their choice.****
****Fees are payable directly to each coach.****

Extra Pre-Registered Sessions (Weekly Summer Ice Package REQUIRED to purchase this):
● Extra session - $55 per week (MTWRF)
  (Walk-On Tickets may be purchased for $13 per session)
● Stroking/Jump/Spin/Edge Class - $40 per week (MTWR)
  (Walk-On Tickets may be purchased for $13 per class)
● Friday Exhibition - $5 per week (F), may pre-register for a limit of two (2)
  (Walk-On Tickets may be purchased for $8 per exhibition)

The High Performance Figure Skating Center reserves the right to shut down the arena for maintenance, test sessions, or other special events with no refund given. In addition, there will be no special packages, rebates, substitutions, make-up, or refund for missed ice time. Sessions are subject to change if there is not enough of a demand for the listed level.
Weeks Attending: Please check the box(es) for the week(s) you plan to attend:

- Week 1 26 June – 30 June
- Week 2 03 July – 07 July
- Week 3 10 July – 14 July
- Week 4 17 July – 21 July
- Week 5 24 July – 28 July

Ice Fees

- $225 Weekly Package \( \times \) _______ (# of weeks) = $ __________
- $ 55 Extra Session #1 MTWRF \( \times \) _______ (# of weeks) = $ __________
- $ 55 Extra Session #2 MTWRF \( \times \) _______ (# of weeks) = $ __________
- $ 40 Stroking/Jump/Spin/Edge \( \times \) _______ (# of weeks) = $ __________
- $ 5 Exhibition #1 wk#_______ \( \times \) _______ (# of weeks) = $ __________
- $ 5 Exhibition #2 wk#_______ \( \times \) _______ (# of weeks) = $ __________

Total Ice Fees

= $ __________

Housing & Meal Package for weeks #1 - #5 is $430 per week and includes:

- Housing Sunday night through Saturday morning* (*Week #5 skater must check out on Friday)
- Breakfast, lunch, dinner, and snacks at any University of Delaware dining facility

****DEADLINE FOR HOUSING REGISTRATION is 22 May 2017****

Housing Weeks: Please check the box(es) for the week(s) you request housing:

- Week 1 25 June – 01 July
- Week 2 02 July – 08 July
- Week 3 09 July – 15 July
- Week 4 16 July – 22 July
- Week 5 23 July – 28 July*

Total Housing Fees

- $430 Weekly Package \( \times \) _______ (# of weeks) = $ __________

Grand Total Ice & Housing Fees

Total Amount Ice & Housing (add all fees together) = $ __________

If registering for a minimum of two weeks Weekly Ice Package AND paying in full at time of registration deduct 5% from Total = $ __________

Grand Total Due

= $ __________

Payment Information

A minimum of $225 or 50% (whichever is greater) of ALL FEES must accompany this application, with the balance due on or before arrival. There is a $50 cancellation fee for cancellations on or before 2 June 2017. After 2 June, cancellations will be charged 25% of the total amount due.

Please check the box for the payment option you desire:

- Two Payments (50% due at registration, balance due on or before arrival)
- One Payment (Full payment due at registration)
- Registration Payment was made online*

*To pay online by credit card, go to http://www.udel.edu/icearenahighperformancecenter and complete the payment form. You must still mail the completed application form. Do NOT include your credit card number on this application; we cannot process credit card payments received by mail, fax, or telephone. Registration will not be confirmed until application form is received and payment is verified.
University of Delaware Ice Arena
Assumption of Risk, Release and Waiver Form

In consideration of the privilege of using the facilities associated with the Fred Rust/Gold Ice Arena at the University of Delaware (the “Arena”) and understanding that there are inherent risks in connection with the use of the Arena, the undersigned hereby releases and waives all claims it has or might ever have against the University of Delaware (the “University”) arising from any University act or omission, including those committed by any University officer, trustee, employee, agent or invitee (“University Personnel”), taken or caused to be taken by University Personnel in good faith in exercise of any right or performance of any duty under any rental agreement to use the Arena. The undersigned acknowledges that, pursuant to this paragraph, it is waiving claims of which it may not be aware and claims which may not have arisen and agrees that, so long as University Personnel have attempted such exercise or performance believing in good faith that such was permitted or required under any rental agreement to use the Arena, no claim shall be brought against the University and the University shall not be liable therefor.

Further, the undersigned shall defend and indemnify the University against all claims, demands and liability, and all consequent costs and expenses, including reasonable attorney’s fees, for injury to persons or damage to property (i) occurring on or about the Arena, (ii) resulting from or associated with the undersigned’s use of the Arena, or (iii) caused or alleged to be caused by any negligent or otherwise wrongful act or omission of the University and/or the undersigned.

The University and its employees and agents reserve the right to expel or exclude any person or organization from University property, including the Arena, when, in judgment of such employees or agents, the behavior of such person or organization is threatening or abusive towards any person or does not otherwise comport with commonly accepted principles of sportsmanship. The decision of such University employee or agent, made on the scene of any incident, is to be immediately obeyed.

____________________________  ________________
Skater’s Signature (18 & Over) Date

____________________________  ________________
Parent’s Signature (skater under 18) Date

Emergency Treatment Release Form

I, ________________________________, hereby authorize any physician and/or member of the medical staff of any hospital or emergency treatment center to render medical treatment*, which in his or her judgment may be deemed necessary in the care of: (*Parents are responsible for all medical expenses incurred)

Name of Skater_________________________ Date of Birth_________________________

Physician Name_________________________ Physician Phone____________________

Allergies_________________________________________________________________

Medicines Currently Taking__________________________________________________

Outstanding Medical History__________________________________________________

Insurance Company____________________________________________________________

Policy Number_________________________ Name of Subscriber______________________

____________________________  ________________
Skater’s Signature (18 & Over) Date

____________________________  ________________
Parent’s Signature (skater under 18) Date

Mail completed application to:
University of Delaware
Fred Rust Ice Arena
Attn: Summer High Performance Figure Skating Center
547 South College Avenue
Newark, DE  19716
**Circle desired sessions and return with your application**

**Summer 2017**
**26 June - 28 July**

### FRED RUST ARENA

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- 7:00 AM - 7:40 AM Freestyle - Low
- 7:40 AM - 8:20 AM Freestyle - Low
- 8:30 AM - 9:10 AM Dance - Competitive
- 9:10 AM - 9:50 AM Dance - Competitive
- 10:00 AM - 10:40 AM Freestyle - Medium
- 10:50 AM - 11:30 AM Freestyle - High
- 11:30 AM - 12:10 PM Freestyle - High
- 12:20 PM - 1:00 PM Freestyle - High
- 1:10 PM - 1:55 PM Stroking/Spin/Edge/Friday Exhibition
- 2:10 PM - 2:50 PM Freestyle - High
- 2:50 PM - 3:30 PM Freestyle - High
- 3:40 PM - 4:20 PM Freestyle - Medium
- 4:20 PM - 5:00 PM Freestyle - Medium
- 5:10 PM - 5:50 PM Freestyle - Low, Pairs - Low, & Dance - Low

### GOLD ARENA

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- 7:40 AM - 8:20 AM Dance - Competitive
- 8:30 AM - 9:10 AM Freestyle - Low & Medium
- 9:10 AM - 9:50 AM Freestyle - Medium
- 10:00 AM - 10:50 AM Dance - Competitive
- 10:50 AM - 11:30 AM Dance - Competitive
- 11:40 AM - 12:20 PM Freestyle - Medium
- 12:20 PM - 1:00 PM Freestyle - Medium
- 1:10 PM - 2:00 PM Elite & Pairs **Coaches may request a High Level exception in writing**
- 2:00 PM - 2:40 PM Freestyle - Medium
- 2:50 PM - 3:30 PM Freestyle - Medium & Low
- 3:30 PM - 4:10 PM Freestyle - Low
- 4:20 PM - 5:00 PM Freestyle - Low

### OFF ICE DANCE

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| 9:20 AM - 10:00 AM Freestyle - Low
| 10:00 AM - 10:40 AM Freestyle - High
| 10:50 AM - 11:30 AM Freestyle - Medium
| 11:40 AM - 12:20 PM Dance Competitive & Pairs

### OFF ICE CONDITIONING

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| 10:00 AM - 10:40 AM Freestyle - Low
| 10:40 AM - 11:20 AM Freestyle - High
| 11:30 AM - 12:10 PM Freestyle - Medium
| 12:10 PM - 12:50 PM Dance - Competitive & Pairs
| 12:50 PM - 2:00 PM Open Lifting
| 2:00 PM - 2:40 PM Freestyle - Low
| 2:50 PM - 3:30 PM Freestyle - Medium
| 3:40 PM - 4:20 PM Freestyle - High
Complete this form ONLY if registering for housing package

Skaters in the dorm may not select Session #14 5:10 – 5:50 due to the dining hall schedule

Wifi access is extremely limited and not guaranteed

Roommate & Suitemate Requests

Skater housing consists of two rooms conjoined by a shared bathroom, referred to as a suite.

To request one (1) specific roommate, complete the Roommate Selection to request a skater to share a bedroom (max two (2) people per room – NO EXCEPTIONS).

Roommate Selection

Roommate #1 ________________________________

In addition, you make choose two (2) suitemates to live in the conjoining room. To request specific suitemates, complete the Suitemate Selection to request up to two (2) skaters to share the suite (max four (4) people per suite – NO EXCEPTIONS).

Suitemate Selection

Suitemate #1 ________________________________  Suitemate #2 ________________________________

Rooming requests are not guaranteed and will be determined by room availability and skater residency

Skater Absence Agreement

Skaters may not leave the University of Delaware facilities including the Fred Rust Ice Arena, Gold Ice Arena, Outdoor Pool, or Dormitory with any parent, relative, coach, friend, family friend, skater, skater parents, significant other, or non-dormitory training center staff without prearranged written parental permission via letter, e-mail, or text message provided to the dorm coordinator.

Parent/Guardian Signature: ________________________________ Date: __________________

Skater Schedule Agreement

The ice time and skating schedule submitted on the skater’s application is used to construct a transportation and staffing schedule. Any changes made to the skater’s schedule after the start of the dormitory may not be able to be accommodated. This may effect dorm/rink pick up and drop off times.

Parent/Guardian Signature: ________________________________ Date: ________________
Behavior Contract

SKATER AGREES:

1. I will show respect to all University staff, fellow skaters and University property.
2. I will follow directions provided by the Resident Assistant/Counselor on duty.
3. I will always obtain permission from the Resident Assistant on duty before leaving the Ice Arena or University Housing for any reason.
4. I will skate the sessions for which I am registered unless the Resident Assistant/Counselor on duty determines I have an appropriate excuse for skipping the session.
5. I will follow the curfew for University Housing of 8:00 p.m. every night.
6. I am not to be alone or in a closed room with a member of the opposite sex.
7. I am not to possess or drink any alcoholic beverages or possess or use any illegal drugs.
8. I will always pick up my trash and throw it in the trashcan both in my room and in the common areas.
9. I will be respectful of quiet hours (9:00 pm – 8:00 am) by keeping noise levels low in my room and the common areas.
10. I will report any problem I experience to the Resident Assistant/Counselor on duty.
11. I will work hard to have a fun and productive stay.
12. I________________________________________ agree to the aforementioned terms of this Behavior Contract. I understand that if I do not comply with the terms outlined in this contract, I will be asked to leave the University Housing Facilities and find my own housing, without refund, for the duration of my stay at the University of Delaware High Performance Figure Skating Center.

________________________________________
Skater’s Signature

________________________________________
Date

________________________________________
Parent’s Signature

________________________________________
Date
Complete this form ONLY if registering for housing package

Emergency Treatment Form/Field Trip Permission Form

Name of Skater________________________________________ Date of Birth______________________________
Address_________________________________________________________ Home Phone________________________
City________________________________ State Zip________ Country____________________________
Mother’s Name________________________________ Mother’s Phone____________________________________
Father’s Name________________________________ Father’s Phone____________________________________
Physician________________________________________ Physician’s Phone________________________________
Dentist________________________________________ Dentist’s Phone________________________________
Date of Last Tetanus Booster ____________________________  
Outstanding Medical History______________________________________________________________

Injuries sustained in the last 5 years: __________________________________________________________

Medicines Being Taken______________________________________________________________

Allergies____________________________________________________________

Insurance Company________________________________ Policy Number________________________________
Subscriber’s Name________________________________________________________

I, ____________________________________________, hereby give permission for my son/daughter______________________________/myself (if 18 or over) to participate in any field trips conducted as part of the University of Delaware High Performance Figure Skating Center Summer Program. I fully understand that the University of Delaware and its’ agents are in no way responsible for any damages or injuries incurred during such trips.

I, ____________________________________________, hereby authorize any physician and/or member of the medical staff of any hospital or emergency treatment center to render medical treatment, and am responsible for all medical expenses incurred, which in his or her judgment may be deemed necessary in the care of my son/daughter__________________________________________________/myself (if 18 or over).

Skater’s Signature (18 & Over) ___________________________ Date _____________ Parent’s Signature (skater under 18) ___________________________ Date _____________
Terms and Conditions of Dormitory Housing

Please review the following information. You will be agreeing to these terms/conditions when you accept a dormitory assignment at the University of Delaware.

A. All campus guest overnight accommodations are non-smoking. Smoking is not allowed on campus.

B. Animals and/or pets of any kind except seeing-eye dogs are prohibited. Seeing eye dogs must be registered with your Resident Assistant.

C. Only individuals of legal drinking age may possess and/or consume alcoholic beverages in the privacy of their own rooms. Possession of open containers and/or consumption of alcoholic beverages are prohibited in public areas, including hallways and stairwells.

D. Participants receive a room key and building access card upon check-in. Individuals are urged to lock their rooms to protect personal belongings. Loss of a key or building access card must be reported immediately. The charge for replacement is $125. Duplication of any University key is prohibited. Participants are required to return keys and cards at the time of departure.

E. Tampering with or misusing safety equipment (exit signs, smoke detectors, fire/smoke barrier doors, etc.) is prohibited. Fire/smoke barrier doors must be kept closed at all times.

F. Candles and/or incense are prohibited.

G. Parking motorcycles, mopeds, or scooters within 10 feet of the building or storing them inside is prohibited.

H. Installing outdoor antennas or tampering with cable or data lines is prohibited.

I. All participants under age eighteen will be required to abide by the curfew established by the ice arena staff. Failure to do so will result in dismissal from University housing.

J. Damaging buildings, furniture, or fixtures is prohibited.

K. Moving University furniture from public areas into individual rooms within the building or moving room furniture to other areas of the building is prohibited.

L. Storing or using flammable/combustible liquids or flammable/explosive gasses is prohibited.

M. Residents may not board in a room that is at full occupancy.

N. Residents may not bring any guest into the dormitory (individual room, common area, or hallway) that has not first been approved by the Resident Assistant.

O. Decorating any room surface with paint, adhesive-backed wall coverings, use of nails or screws, or altering the premises in any manner whatsoever without written permission from the Resident Assistant is prohibited.

P. Hot plates, microwaves, similar appliances and extension cords are not permitted in rooms nor is any type of cooking allowed in rooms. Only basement kitchens may be used for this purpose.

Q. Playing athletic games (e.g. floor hockey, frisbee, football, etc.) or using athletic equipment (e.g. roller blades, etc.) within the building is not permitted.

R. Participating in any activity that is in violation of health, fire, safety, or maintenance codes is prohibited.

S. Using exposed wires in hallway or from window-to-window is prohibited.

T. Removing screen/storm windows or opening security screens, except in emergencies, is prohibited.

U. Closet doors may not be removed.

V. The University of Delaware shall not be responsible for the loss or damage to any personal property from any cause whatsoever. It is recommended that all participants insure their personal property.

I __________________________________ agree to the following terms and conditions of this dormitory housing contract. I understand that if I do not comply with the terms and conditions outlined in this contract, I will be asked to leave the dormitory housing at the University of Delaware.

Skater’s Signature Date Parent’s Signature Date