



Arbour Lake Residents Association
12 Arbour Lake Drive NW Calgary, AB. T3G 4A3
Ph(403)-241-2628 Fx(403)-547-8770
info@arbourslake.com www.arbourslake.com

WINTER PROGRAM REGISTRATION 2026

Participant name			
Participant Age			
Address			
Phone Number		Email	
Does the participant have any allergies, illness or Behavioral Problems?			

Emergency Contact name			
Phone Number		Email	

I give permission to have photos taken to be published in the Arbour Lake Residents Association Newsletter and associated promotional materials, social media and website.	Yes	No
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All programs go from January 10th to February 7th. Courses are held on Saturdays at the chosen time. If a lesson is cancelled due to bad weather, a catch-up lesson will be scheduled. There is no refund for missed or rescheduled classes.

Parents & Tots (Ages 3-5)		☐ 10:00 – 10:30 ☐ 10:45 – 11:15 ☐ 11:30 – 12:00	P1 P2 P3
Leveled Classes	Level 1 (Ages 5+)	☐ 12:00 – 12:45 ☐ 1:00 – 1:45 ☐ 2:00 – 2:45	L1A L1B L1C
	Level 2 (Ages 5+)	☐ 3:00 – 3:45 ☐ 4:00 – 4:45	L2A L2B
Beginner Adult (Ages 16+)		☐ 12:15 – 1:00 ☐ 1:15 – 2:00	BA1 BA2
Intro to Ringette	R1 (Ages 7-9)	☐ 11:00 – 11:45	R1
	R2 (Ages 10-12)	☐ 12:00 – 12:45	R2

65\$/Participant

Method of payment:

☐ Cash ☐ Cheque

☐ Debit ☐ Credit

Receipt # _____

Staff Initial _____

Acknowledgement, Release and Waiver In consideration of permission, granted now or in the future by the Arbour Lake Residents Association to participate in the above program during the year 2026 I agree and acknowledge that (1) there is nothing to my knowledge that indicates that I have not met all the prerequisites required for participation in the program. (2) I will abide by the rules and regulations imposed on the participants in the program. (3) I freely and voluntarily assume any risks and hazards inherent in the nature of the program and accordingly my participation in the program shall be entirely at my own risk. (4) I waive any claim I may have against the Arbour Lake Residents Association including the staff, associates, agents, consultants and or instructors arising from my participation in the program and agree to indemnify and save harmless the Arbour Lake Residents Association and including the staff and associates for any claim, whatsoever, arising from my participation in the program. **(5) I am aware that the registration fee is NON-REFUNDABLE unless the program is cancelled by the Arbour Lake Residents Association.** (6) This RELEASE, WAIVER OF CLAIM and ASSUMPTION OF RISK are binding on me, my heirs, and my executors, administrators, personal representatives, and assigns.

Participant signature:
OR parent signature if under 18:

Date: