



MIDLAND, MICHIGAN
50 Years and Growing!



2012 MSSC REGIONAL WINTER ICE BLAST - MIDLAND CIVIC ARENA, 405 Fast Ice Drive, MIDLAND, MI.

SATURDAY, FEBRUARY 11, 2012

CHECK IN ENDS AT 7:30 AM * Warm-up BEGINS AT 7:15 AM * Racing STARTS AT 8:00 AM

REGISTRATION DEADLINE IS THURSDAY, FEBRUARY 9, 2012

ENTRY FEE: \$35.00 per skater (\$70.00 maximum fee per family). Awards:1st , 2nd , 3rd, & 4th place.
This is an Age Class Meet (Midget & under) & Ability Meet (Juvenile & up); please provide ISU/US age-classification and date of birth. **Entries without seed time will not be accepted.**
Novice class may be run for first year skaters if sufficient entries received.
Fee must accompany entry. Make checks payable to: Midland Speed Skating Club.

SEND ENTRY TO: Jill Strouse, 2620 St. Marys Street, Midland MI 48640
EMAIL: jillstrouse@gmail.com

The race schedule will be per ISU age requirements and may be changed or combined at the discretion of the sponsors or officials. Equipment Required: Long sleeve jersey, gloves, neck protector, knee protection, shin guards and a hard shell helmet.

Directions to the Midland Civic Arena and Information on Lodging: go to www.msscevents.com for detailed maps, hotel, city, arena photos, and meet information.

----- cut on dotted line, return bottom portion of form with entry fee -----

2012 MSSC REGIONAL WINTER ICE BLAST - Release Form

In consideration of the acceptance of my entry in the above event, I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which may have, or which any hereafter occur to me as a result of my participation in said event. This release is intended to discharge in advance the promoters, the sponsors, (the Midland Parks and Recreation Dept., Midland Speed Skating Club, Michigan Speedskating Association, US Speedskating) and any involved municipalities or other public entities (and their respective agents and employees), from and against any and all liability arising out of or connected in any way with my participation in said event, even though the liability arises out of negligence on the part of the persons or entities mentioned above. It is further understood and agreed that this waiver, release and assumptions of risk is to be binding on my heirs and assigns. I further agree to wear approved safety equipment compliant with ISU Rule 291 consisting of protective head gear, gloves, neck protector, knee protection, shin guards, shirts with long sleeves, and long pants.

Print Name: _____
Applicants Signature: _____ Date: ___/___/___
Parent/Guardian: _____ Date: ___/___/___
Class: _____ Male: ___ Female: ___ Birth Date: ___/___/___ Age: _____
Novice/First Year Skater: ___(yes/no) 333 Time _____ (Tiny Tots only)
500 M Time: _____ (PeeWee/Up)
Address: _____ City: _____ State: _____ Zip: _____
Club Affiliation: _____ Home Phone:(_____) _____ - _____
Email: _____