

Parent/Guardian or Member Waiver

I, the parent/guardian or member of the registered participant _____, assume all risks and hazards associated with the sport of ice hockey and or ice skating, incidental or otherwise. This includes travel to and from scheduled activities directly associated with Everett Youth Hockey Boosters Club (EYHBC) and Everett Youth Hockey (EYH) team participation. Therefore, I waive, release, absolve, indemnify and agree to hold harmless the EYHBC, its officers, directors, sponsors, supervisors, coaches, assistant coaches, referees, governors, managers and other participants and persons associated with EYHBC for any and all claims arising out of injury to my child. In addition, I give EYHBC and its representatives the right to arrange, obtain and approve any medical attention deemed necessary for the health and well-being of the above applicant for injuries sustained during any EYHBC event or activity. I understand and accept that I am responsible for any medical expenses not covered by my insurance provider. I also understand all/any participant must be registered with USA Hockey and registered player with EYH and in good standing in order to participate in any/all scheduled EYHBC activities. ___I also agree to release, absolve and hold harmless all/any from injury sustained while on property (arena, parking area, buildings, etc.) while participating with EYHBC in any event or activity. It is understood that EYHBC is the leasee of arena facilities and is neither directed nor governed, nor part of leased ice facilities or any/all off-ice training facilities. I have read this agreement and waiver in its entirety and accept and agree to all of the terms and conditions stated herein.

Parent/Guardian or Member Signature: _____

Date: _____

Players Name: _____

DOB: _____

USA Hockey Registration Number: _____