



SAN DIEGO JR. GULLS

2018 TRYOUT 2019 REGISTRATION

PLAYER / CONTACT
INFORMATION

PLAYER NAME:

DATE OF BIRTH:

SCAHA#:

PARENT/(S):

PHONE#:

EMAIL:

2017-18 TEAM:

POSITION:

LIABILITY WAIVER

WAIVER AND RELEASE OF LIABILITY: ICE-PLEX (HEREBY REFERRED TO AS "PROGRAM") In consideration of being allowed to participate in any way in sports programs and other sponsored activities at or by PROGRAM, the undersigned acknowledges and agrees as follows: 1. I ACKNOWLEDGE AND FULLY UNDERSTAND THAT I WILL BE ENGAGING IN ACTIVITIES THAT INVOLVE RISK OF SERIOUS INJURY, INCLUDING PERMANENT DISABILITY AND DEATH, AND SEVERE SOCIAL AND ECONOMIC LOSSES WHICH MIGHT RESULT NOT ONLY FROM MY OWN ACTIONS, INACTIONS, OR NEGLIGENCE, BUT ALSO FROM THE ACTION, INACTION, OR NEGLIGENCE OF OTHERS, THE RULES OF PLAY, OR THE CONDITION OF THE PREMISES OR COMPETITION AREA OR ANY EQUIPMENT USED. FURTHER, THAT THERE MAY BE OTHER RISKS NOT KNOWN TO ME OR NOT REASONABLY FORSEEABLE AT THIS TIME. 2. I AGREE THAT PRIOR TO PARTICIPATING IN ANY ACTIVITY SPONSORED BY PROGRAM, I WILL INSPECT THE COMPETITION AREA AND ALL EQUIPMENT TO BE USED, AND IF, THROUGH MY INSPECTION, I DETERMINE THAT ANYTHING RELATING TO THE ACTIVITY IS UNSAFE, I WILL IMMEDIATELY ADVISE MY COACH OR AN OFFICIAL OF THE PROGRAM OF THIS UNSAFE CONDITION AND WILL NOT PARTICIPATE UNTIL THE CONDITION IS CORRECTED. 3. I ASSUME ALL FORGOING RISKS AND ACCEPT PERSONAL RESPONSIBILITY FOR THE DAMAGES FOLLOWING SUCH INJURY, PERMANENT DISABILITY OR DEATH. 4. I RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE PROGRAM, IT'S PARTICIPANTS, SPONSORING AGENCIES, SPONSORS, ADVERTISERS, AND IF APPLICABLE, OWNERS AND LESSORS OF PREMISES USED TO CONDUCT THE EVENT, ALL OF WHICH ARE HERINAFTER REFERRED TO AS "RELEASEES", FROM DEMANDS, LOSSES, OR DAMAGES ON ACCOUNT OF INJURY, INCLUDING DEATH OR DAMAGE TO PROPERTY CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. I HAVE READ THE ABOVE WAIVER AND RELEASE, AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY, I ALSO AGREE TO ABIDE BY ALL RULES OF ICE-PLEX/SAN DIEGO JR. GULLS HOCKEY PROGRAM. -NO REFUNDS

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____

BELOW TO BE COMPLETED BY ICE-PLEX / SAN DIEGO JR. GULLS REPS.

ICE-PLEX "PAID" STICKER HERE



2018-2019

USA HOCKEY REG.:

PLAYERS CANNOT STEP ON THE ICE WITHOUT THIS!

Y

N

BIRTH CERTIFICATE:

PLAYERS NEW TO SCAHA/CAHA

Y

N

TRY-OUT
JERSEY#:

