



Participant's Name: _____ **Date of Birth:** _____

Last Level Played: _____ **Team:** _____

Program Name: 2020 Spring Program **Sessions:** _____

Parent and Guardian Information

#1: Parent / Guardian Full Name: _____ **Relationship:** _____

Phone: _____ **Email:** _____

#2: Parent / Guardian Full Name (optional): _____ **Relationship:** _____

Phone: _____ **Email:** _____

Medical Information

My Child has the following allergies, or pre-existing illness/health concern (s). Please indicate if an EpiPen and/or any other medications are carried by your child:

Program Release and Waiver Liability

1. The participant assumes all risk of personal injury in which may result from participation in the Persistent Hockey Development program. Be advised that all Persistent Hockey Development programs require full equipment.
2. The participant will not hold Persistent Hockey Development, any of the officials or staff liable for injury which the player may sustain while participating in the program. The participant agrees that hockey can be a dangerous sport which may result in injury or death. However, this clause applies only to the extent of such injury, death or loss is not caused by the negligence of Persistent Hockey Development or its employees.
3. The participants certify that he/she has no known medical condition which would prohibit him/her from participation in the program and the participant agrees that he/she will act in a responsible manner during all programs.
4. Individuals who participate in Persistent Hockey Development Programs understand that Persistent Hockey Development shall not be held responsible in any way for any accident or injury of medical expense incurred as a result of his/her participation in the program.
5. Persistent Hockey Development is not responsible for any damaged, lost or stolen articles.
6. I hereby grant and release to Persistent Hockey Development, the right to use photographs, audio tapes, and/or videotapes which I and/or my children appear in any materials such as videos, films, recordings, photographs or articles relating to Persistent Hockey Development, its programs and services including, but not limited to, brochures, newsletters, or our website, whether on television, radio, or any other medium.
7. All information given to Persistent Hockey Development will be protected and private.

This is to certify that I, above named participant, or parent/guardian with legal responsibility for this participant, do consent and agree to the Program Release and Waiver Liability.

Parent/Guardian (Print)

Parent/Guardian (Sign)

Date

YES, I would like to receive future emails regarding future services from Persistent Hockey Development regarding future services (Check to receive emails, leave blank if you wish not to receive them).