

HILLER HOCKEY WAIVER AND INDEMNITY AGREEMENT

By signing this form, I hereby acknowledge that I have been made aware of the inherent risks involved in ice hockey and I knowingly and freely accept those risks. Further, I acknowledge and agree that:

- 1. The risk of injury from the activities involved in ice hockey are significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist; and
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown of my participation in this ice hockey program and assume full responsibility for my participation; and
- 3. I willingly agree to abide by the stated and customary terms and conditions for participation in ice hockey. If, however, I observe any unusual condition or hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless Hiller Hockey, Friends of Hiller Hockey, Hopkinton School District, New England Sports Center, and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees and volunteers (Individually and Collectively, the "Released Parties"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including any court costs and reasonable attorney fees of any kind or nature ("Liability") which may arise out of, result from, or relate to my participation in ice hockey, including claims for liability caused in whole or in part by the negligence of the Released Parties. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liability which may be incurred as the result of such claim.

I have read and understood the above Waiver and Indemnity Agreement and sign it freely and voluntarily without any inducement.

Participant's Name

Grade

Email Address

Participant's Signature (18 and older)

Date Signed

Age

FOR PARENTS/GUARDIANS OF PARTICIPANTS UNDER 18 YEARS OF AGE

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided to the Released Parties.

Parent/Guardian's Signature (under 18)

Date Signed

Emergency Phone#

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate in Ice Hockey Captain's Practices being organized by Friends of Hiller Hockey the undersigned acknowledges, appreciates, and agrees that:

- Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and.
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Friends of Hiller Hockey, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of participant:

Participant signature:

Name of parent/guardian: _____

Parent guardian/signature:

Date signed:

Date signed:	
FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGIS	TRATION)
This is to certify that I, as parent/guardian, with legal responsibility for this participant, he provisions in this waiver/release to my child/ward including the risks of presence and papersonal responsibilities for adhering to the rules and regulations for protection against Furthermore, my child/ward understands and accepts these risks and responsibilities. I child/ward do consent and agree to his/her release provided above for all the Releases and child/ward do release and agree to indemnify and hold harmless the Releasees for my minor child's/ward's presence or participation in these activities as provided above THEIR NEGLIGENCE, to the fullest extent provided by law.	articipation and his/her communicable diseases. for myself, my spouse, and s and myself, my spouse, any and all liabilities incident