

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the O'Sullivan Hockey Academy, the undersigned acknowledges, appreciates, and agrees that:

- 1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
- 2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases 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. If however I observe any unusual 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 the O'Sullivan Hockey Academy, their officers, officials, agents and/ or employees, there participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releases"), with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releases or otherwise.

| X | Date Signed | |
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| AND VOLUNTARILY WITHOUT ANY INDUCEMENT. | | |
| HAVE GIVING UP SUBSTANTIAL RIGHTS | BY SIGNING IT, AND SIGN IT FREELY | |
| AGREEMENT, AND FULLY UNDERSTAND | ITS TERMS, UNDERSTAND THAT I | |
| I HAVE READ THIS RELEASE OF LIABILI | TY AND ASSUMPTION OF RISK | |

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

PARTICIPANT'S NAME (Please print)

This is to certify that, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all Releases, and for myself, my heirs, assigns, and next of kin, I release participation in these programs as provided above, even if arising from their negligence.

| X | |
|-----------------------------|------------------------|
| PARENT/GUARDIAN'S SIGNATURE | EMERGENCY PHONE |