



COALDALE MINOR HOCKEY ASSOCIATION Informed Consent/Liability Waiver for Parent & Child/Siblings On Ice Games

DETAILS OF ACTIVITY

Nature of Activity: Parent vs Child/Siblings Hockey Activity

Date: _____

Destination: Coaldale Sportsplex

Summary of Activities (Itinerary Attached): Parents & Child/Siblings will be playing a game of hockey against a CMHA Hockey team.

ELEMENTS OF RISK

Physical activity programs such as Coaldale Minor Hockey involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injuries which may result from participating in a Hockey Game (description of activity).

1. minor scrapes, bruises, breaks from falling while skating
2. concussions
3. unforeseen events

The risk of sustaining these types of injuries result from the nature of the activity and can occur without fault of either the participant or Coaldale Minor hockey, its volunteer or board members or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you or your children (aged 18 and under) may be injured.

The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity.

If you choose to participate in the Parent & Siblings vs Players Hockey Game you must understand that you bear the responsibility for any injury that may occur to both yourself and children of which you are a guardian of that may also attend this event.

Coaldale Minor Hockey Association does not provide accidental death, disability or dismemberment or medical expense insurance on behalf of the parents participating in this activity.

ACKNOWLEDGEMENT

We have read the above. We understand that by participating in the activity described above, we are assuming the risks associated with doing so.

Signature of Parent/Guardian

Date

PARTICIPANTS

FULL NAME

FULL NAME

FULL NAME

FULL NAME

FULL NAME

PERMISSION

I give the above listed participants permission to participate in the Hockey Game/Skate (description of activity) to be held on or about _____ (Date).

Signature of Parent/Guardian

Date