

Saturday Night Hockey Club (SNHC) Waiver

In consideration of your accepting this entry, I hereby, for myself, my heirs, executors and administrators, waive and release any and all right and claim for damages I may have against the organizers holding the Saturday Night Hockey Club (SNHC) ice hockey games, their agents, representatives, successors and assigns, for any and all injuries suffered by me at any of these ice hockey games.

I WARRANT that I am physically fit to participate in the ice hockey games.
I UNDERSTAND that I am participating at my own risk and have been encouraged to wear proper protective equipment required for participating in the ice hockey games of the Saturday Night Hockey Club (SNHC).

BY SIGNING THIS FORM, I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED TO THE ABOVE WAIVER.

Player Name (Print)

Player Signature

Date (mmm-dd-yyyy)

If participant is under the age of 18 years, the parent or legal guardian must sign below.

Parent / Legal Guardian Name

Parent / Legal Guardian Signature

Date (mmm-dd-yyyy)