



Waiver of Liability, Release Assumption of Risk & Indemnity Agreement

It is the purpose of this agreement to exempt, waive and relieve releases from liability for personal injury, property damage, and wrongful death, including if caused by negligence, including the negligence, if any, of releasees. "Releasees" include USA Hockey, Inc., its affiliate associations, local associations, member teams, event hosts, other participants, coaches, officials, sponsors, advertisers, and each of them, their officers, directors, agents and employees.

For and in consideration of the undersigned participant's registration with USA Hockey, Inc., its affiliates, local associations and member teams (all referred to together as USAH) and being allowed to participate in USAH events and member team activities, participant (and the parent(s) or legal guardian(s) of participant, if applicable) waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury, property damage or wrongful death occurring to participant, arising out of participation in USAH events, member team activities, the sport of ice hockey, and/or activities incidental thereto, whenever or however they occur and for such period said activities may continue, and by this agreement any such claims, rights, and causes of action that participant (and participant's parent(s) or legal guardian(s), if applicable) may have are hereby waived, released and relinquished, and participant (and parent(s)/guardian(s), if applicable) does(do) so on behalf of my/our and participant's heirs, executors, administrators and assigns.

Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge, understand and assume all risks relating to ice hockey and any member team activities, and understand that ice hockey and member team activities involve risks to participant's person including bodily injury, partial or total disability, paralysis and death, and damages which may arise therefrom and that I/we have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant or the negligence of others, including the "releasees" identified below. These risks and dangers include, but are not limited to, those arising from participating with bigger, faster and stronger participants, and these risks and dangers will increase if participant participates in ice hockey and member team activities in an age group above that which participant would normally participate in. I/We further acknowledge that there may be risks and dangers not known to us or not reasonably foreseeable at this time.

Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge, understand and agree that all of the risks and dangers described throughout this agreement, including those caused by the negligence of participant and/or others, are included within the waiver, release and relinquishment described in the preceding paragraph. I/We agree to abide by and be bound under the rules of USA Hockey, including the By-Laws of the corporation and the arbitration clause provisions, as currently published. Copies are available to USA Hockey members upon written request.

Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge, understand and assume the risks, if any, arising from the conditions and use of ice hockey rinks and related premises and acknowledge and understand that included within the scope of this waiver and release is any cause of action (including any cause of action based on negligence) arising from the performance, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said rinks, for negligent selection of certain releasees, or negligent supervision or instruction by releasees.

Participant (and participant's parent(s)/guardian(s), if applicable) agree if any claim for participant's personal injury or wrongful death is commenced against releasees, he/she shall defend, indemnify and save harmless releasees from any and all claims or causes of action by whomever or wherever made or presented for participant's personal injuries, property damage or wrongful death.

Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers of ice hockey and understand these waivers and releases are necessary to allow amateur ice hockey to exist in its present form. Significant exclusions may apply to USA Hockey's insurance policies, which could affect any coverage. For example, there is no liability coverage for claims of one player against another player. Read your brochure carefully and, if you have any questions, contact USA Hockey or a District Risk Manager.

PARTICIPANT SIGNATURE & DATE

PARTICIPANT AGE

PARTICIPANT NAME (PRINT)

PARENT/GUARDIAN SIGNATURE & DATE
(if participant is 17 years of age or younger)



USA HOCKEY CONSENT TO TREAT

This is to certify that on this date, I _____, as parent or guardian of _____, give my consent to USA Hockey and its medical representative to obtain medical care from any licensed physician, hospital, or clinic for the above mentioned athlete, for any injury that could arise from participation in USA Hockey sanctioned events.

If said athlete is covered by any insurance company, please complete the following:

Name of Insurance Co.: _____

Address: _____

Policy Number: _____

Signed: _____
(parent/guardian)

Relationship to Athlete: _____

Home Address: _____

Phone: _____

Date: _____

Excess accident insurance up to \$25,000, subject to deductibles, exclusions and certain limitations, is provided to all USA Hockey registered team participants. For further details call Jay Bernard at 1-800-486-6880.



MEDICAL HISTORY FORM

Name: _____

Date: _____

Address: _____

City, State, Zip: _____

Birth date: _____

Daytime Phone: _____

Evening Phone: _____

WHO TO CONTACT IN CASE OF AN EMERGENCY?

Name: _____

Relationship: _____

Daytime Phone: _____

Evening Phone: _____

Physician's Name: _____

Office Phone: _____

Hospital of Choice: _____

PLEASE COMPLETE THE FOLLOWING:

If the answer to any of the following questions is or was yes, please describe the problem and its implications for proper first aid treatment on a separate piece of paper.

Have you had (or do you presently have) any of the following?

Head injury (concussion, skull fracture)

Fainting spells

Convulsions/epilepsy

Neck or back injury

Asthma

High blood pressure

Kidney problems

Hernia

Diabetes

Heart murmur

Allergies

specify: _____

Injuries to:

Shoulder

Knee

Ankle

Fingers

Arm

Other: _____

Impaired vision

Impaired hearing

Other: _____

Circle One

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Have you had a recent tetanus booster? _____ If so, when? _____

Are you currently taking any medications? _____ What? Why? _____

Has the doctor placed any restrictions on your activity? _____ Explain _____

Athlete signature: _____ Date: _____

Parent signature: _____ Date: _____



Massachusetts Hockey Fair Play and Respect Program

PARENT'S CODE OF CONDUCT

It is the intention of this compact to promote Fair Play and Respect for all participants within Massachusetts Hockey. It is expected that all parents of Massachusetts Hockey participants read and understand the Parent's Code of Conduct and continue to observe and follow all the principles contained within the Code throughout the year.

- 1) I will not force my child to participate in hockey. I will try to make it FUN!
- 2) I will encourage my child to play by the rules and to resolve conflict without resorting to hostility or violence.
- 3) I will teach my child that doing one's best is as important as winning so that my child will never feel defeated by the outcome of the game. I will make my child feel like a winner every time by offering praise for competing fairly and hard.
- 4) I will never ridicule or yell at my child for making a mistake or losing a game.
- 5) I will remember that children learn by example. I will applaud good plays by both my child's team and their opponents. I will not be critical of, or embarrass any player, including opposition players.
- 6) I will never question the official's judgment or honesty in public. I recognize that officials are being developed in the same manner as players.
- 7) I will respect and show appreciation for the volunteers who give their time to hockey for my child.
- 8) I will never yell, taunt, threaten or inflict physical violence upon any player, coach, official or spectator at any youth hockey activity. I will refrain from the use of abusive or vulgar language, racial, ethnic or gender-related slurs at any time at the rink or any youth hockey function. I will support all efforts to remove verbal and physical abuse from youth hockey games.
- 9) I will leave the coaching to the coaching staff. I will encourage my child to play in a manner consistent with the team's strategy or plans.
- 10) I will emphasize skill development and a serious approach to practices and explain how skill development will benefit my child.
- 11) I will attempt to learn about the game of hockey (USA Hockey rules, equipment, levels, skills, etc.) so that I may best support my child's development in the game.
- 12) I will not throw objects of any kind on the ice, or lean over and pound on the glass.
- 13) I will communicate all and any concerns regarding inappropriate behavior to the Team Manager, Coach, ACE (Association Coaching Education) Coordinator or local youth hockey association representative.



- 14) I will insist that my child plays in a safe and healthy environment. I will support a sports environment that is free of alcohol, drugs or tobacco and I will refrain from their use at all youth sports events.
- 15) I understand the benefits from participating in a team sport, the commitment, the discipline and the social skills learned and acquired.
- 16) I will remember that my child plays hockey for his or her enjoyment, not mine.

I have read and understand the above Code of Conduct, and agree to abide by its guidelines at all team and league activities. I understand that if I do not follow this Code of Conduct, I may be asked to leave the league activity (such as a game or practice) or I may be asked to withdraw my child from the league.

Print Name: _____

Date: _____

Parent Signature: _____

Parent Signature: _____

Player's Name: _____

Team: _____