

Turf Burn Field Hockey Summer League

Turf Masters

Athlete Information

Last Name:	First Name:	
Email Address:	Date of Birth: /	
Allergies:		
Insurance Provider:	Policy Number:	
Emergency Contact #1		
Name:	Relationship:	
Cell Phone:	Home Phone:	
Other Phone:		
Emergency Contact #2		
Name:	Relationship:	
Cell Phone:	Home Phone:	
Other Phone:		
2. Unsportsmanlike conduct, inappro		
8	to abide by the stated rules and understand the possible consequences if at my own risk and release Turf Burn Summer League and its staff of any rinjury.	
Athlete's Signature:	Date:	
	gue takes photographs of the high school and adult divisions for the league's ant your picture on the Turf Burn website/advertising, please speak to the director.	
	sions OR 6/136/206/277/37/117/18	



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In consideration of being permitted to participate in any way in Turf Burn Field Hockey Summer League indicated below, the undersigned named below agrees:

- 1. Prior to participating in the below Turf Burn Field Hockey Summer League activity or event, I should inspect the facilities and equipment to be used, and if I believe anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agreed that, if at any time, I feel anything to be UNSAFE, I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.
- 2. I/WE fully understand and acknowledge that: a) There are risks and dangers associated with participation in field hockey events and activities which could result in bodily injury, partial and/or total disability, paralysis and death. (b) The social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe. (c) These risks and dangers may be caused by the action, inaction or negligence of the participant or the action, inaction or negligence of others, including, but not limited to, the Releasees named below. (d) There may be other risks not known to us or are not reasonably foreseeable at this time.
- **3.** I/WE accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Releasees named below.
- 4. I/WE HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE Turf Burn Field Hockey Summer League, including its owners, managers, promoters, lessees of premises used to conduct the field hockey event or program, premises and event inspectors, underwriters, consultants and others who give recommendations, directions, or instructions to engage in risk evaluation or loss control activities regarding the Turf Burn Field Hockey Summer League facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purposes herein referred to as "Releasee"...FROM ALL LIABILITY TO THE UNDERSIGNED, my/our personal representatives, assigns, executors, heirs and next to kin FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES AND ANY CLAIMS OR DEMANDS THEREFORE ON ACCOUNT OF ANY INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OR DAMAGE TO PROPERTY, ARISING OUT OF OR RELATING TO THE EVENT(S) CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE.
- **5.** I/WE HEREBY acknowledge that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
- **6.** EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.
- 7. I, the participant, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, execute this Waiver and Release. If, despite this release, the participant makes a claim against any of the Releasees, I will reimburse the Releasee for any money which they have paid to the participant, or on his behalf, and hold them harmless.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Participant's Signature	
Date	
Printed Name of Participant	
Participant Address	
Participant Phone Number	