

Team Northwest AAA Hockey

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REGISTRATION, MEDICAL AND PAYMENT

(Please print and complete all Information)

*****REGISTRATION*****

PLAYER NAME: _____ POSITION: _____ HT: _____ WT: _____

PARENTS: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ BIRTH DATE: MO _____ DAY _____ YEAR _____

EMAIL ADDRESS: _____

*****HEALTH/MEDICAL INFORMATION*****

MEDICAL INSURANCE CO. _____

POLICY # _____

FAMILY PHYSICIAN _____ TELEPHONE # _____

ALLERGIES _____

IN CASE OF EMERGENCIES, CONTACT: _____

TELEPHONE: _____ ADDRESS: _____

CITY _____ STATE _____ ZIP CODE _____

Appointment of Agent & Consent for Medical Care

I hereby appoint Team Northwest, their officials, and/or, _____

_____, of lawful age, as my
(Name of appointee who is accompanying child)

agent and representative for the purpose of authorizing and consenting to hospital care

and/or medical treatment of _____ for any illness or injury
(Name of child)

that may occur while such person is in the care or custody of the agent between the dates
of _____ and _____, while I am away on vacation or,
otherwise not immediately available to give such consent.

ALLERGIES: _____ LAST TETANUS TOXOID: _____

FAMILY PHYSICIAN _____ TELEPHONE _____

Dated this _____ day of _____ in the year _____

(Parent of Guardian)

Witnessed by: _____

**This form must be completed as a precautionary measure even though you intend to
accompany your child to practice sessions, games, etc.**

PLEASE RETURN WITH YOUR REGISTRATION/WAIVER FORM

Team Northwest AAA Hockey
***** Release of Liability and Assumption of Risk Agreement *****

In consideration of being allowed to participate in any way with Team Northwest, Stampede Challenge AAA Hockey Tournament, related events and activities, **I acknowledge, appreciate and agree that:**

- 1) The risk of injury from the activities involved in these programs 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 which may be incurred by any player or person while participating with Team Northwest, or traveling to or from scheduled practices, games, or involvement with Team Northwest, Stampede Challenge AAA Hockey tournament, **and assume full responsibility for my child's participation, even if arising from the negligence of the releases**, and
- 3) I and my child willingly agree to comply with the stated and customary terms and conditions for participation. If however I/we observe any unusual significant hazard during our presences or participation, I/we will remove ourself from participation and bring such to the attention of the nearest local 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 Team Northwest, Stampede Challenge AAA Hockey Tournament, their officers, officials, agents and/or employees, other participants, and owners and lessors of the premises used to conduct the events, with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise.**

This is to certify that I, as Parent or Guardian with legal responsibility for the above participant, and the participant, HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

I do consent and agree to his release as provided above of all the Releasees, and, for myself, my heirs, assigns, personal representatives and/or next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, even if arising from the negligence of the releasees, to the fullest extent permitted by law.

PLAYER/PARTICIPANT SIGNATURE

DATE

PARENT/GUARDIAN SIGNATURE

PARENT/GUARDIAN SIGNATURE

DATE