#### **Team Northwest AAA Hockey**

Todd Collins 1318 N Malibu Lane Gilbert, AZ. 85234 (480) 926 – 2234 480-239-9768

Pamm@tnw-hockey.com

#### **REGISTRATION, MEDICAL AND PAYMENT**

(Please print and complete all Information)

### \*\*\*REGISTRATION\*\*\*

PLAYER NAME:	POSITION	POSITION:				
PARENTS:	ADDRESS:					
CITY:	STATE:	ZIP CODE:				
PHONE:	BIRTH DATE: MO	) DAY	YEAR			
EMAIL ADDRESS:			_			
***H	EALTH/MEDICAL IN	<u>IFORMATIO</u>	<u>N***</u>			
MEDICAL INSURANCE	CO					
POLICY #						
FAMILY PHYSICIAN	1	TELEPHONE #_				
ALLERGIES						
IN CASE OF EMERGEN	CIES, CONTACT:					
TELEPHONE:	ADDR	ESS:				
CITY	STATE	ZIP CODE_				

## **Appointment of Agent & Consent for Medical Care**

I hereby appoint Tea	m Northwest, their	officials, and/or,			
	, of lawful age, as my who is accompanying child)				
(Name of appointee who	is accompanying chil	d)			
agent and representa	tive for the purpose	e of authorizing and consenting to hospital care			
and/or medical treatment of		e of child) for any illness or injury			
		ne of child) he care or custody of the agent between the dates			
		, while I am away on vacation or			
otherwise not immed	liately available to	give such consent.			
ALLERGIES:		LAST TETANUS TOXOID:			
FAMILY PHYSICIA	AN	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 observer any unusual significant hazard during our presences or participation, I/we will remove ourself from participation and bring such to the attention o 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 SUBSTAINTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUTARILY 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	
	DITTE	
PARENT/GUARDIAN SIGNATURE	PARENT/GUARDIAN SIGNATURE	DATE

## **Travel Permit**

I ,	parent	t of	, player, hereby
allow officials of Te	eam Northwest	and/or	, of
lawful age to transp	ort the above n	named player to and from	Team Northwest
practices, games and	d tournaments	both within the continent	tal United States,
and Canada, from _		to	·
Dated this	day of	in the year	
(Parent or Guardian)		(Parent or Guardian)	
Witnessed by:			

Given our tournament play includes AAA Hockey Tournament and the possibility of other exhibition games, it is imperative to have this form signed by both parents and returned with the registration packet.