

Tornado Pride STP Waiver

This registration will gather player information and complete the liability waiver form that is required for your child to participate in the 2020 Tornado Pride STP.

This registration must be completed before your child can participate in any Tornado Pride STP activities.

Thank you for choosing to participate in the Tornado Pride STP.

Player Liability Waiver

In consideration of your acceptance of my child as a participant in any event related to Tornado Pride STP I, for myself and my child, hereby waive all claims against the Tornado Pride STP, Jerrid Reinholz, all other coaches, Anoka Area Hockey Association (AAHA) and its board, employees, players and agents (collectively "AAHA and Jerrid Reinholz"), and release AAHA and Jerrid Reinholz from claims for, any injuries or illnesses suffered by my child incidental to, connected with, or arising out of the activities related to AAHA and Jerrid Reinholz, including injuries/illnesses suffered as a result of negligence of AAHA and Jerrid Reinholz, but not including injuries/illness suffered as a result of wilful or intentional misconduct. I give my approval to my child's participation in all activities related to AAHA and Jerrid Reinholz. I understand that the program for which I have given my permission may be hazardous and that injuries may occur in the normal course of play or instruction, and I assume all risks and hazards incidental to my child's participation including transportation to and from the activities. I understand that AAHA and Jerrid Reinholz has no liability, medical or health insurance covering my child.

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of Tornado Pride STP and AAHA related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest 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 AAHA and their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Parent Signature:* _____

Parent Name (printed): _____

Player Name: _____

I/WE 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 IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

TORNADO PRIDE STP SOCIAL DISTANCING PLAN FORM

This to certify that on this date, I as parent or legal guardian of, or for myself as an adult participant, agree to abide by the AAHA Plan for social distancing and I further agree to abide by all of the rules and guide lines established for the Anoka Area Ice Arena or any other rink that the Tornado Pride STP program will rent ice from for the 2020 STP. I also agree to check my child's temperature prior to each Tornado Pride STP activity and will not allow my child to participate in any activity if he/she is showing any signs of illness.

Parent Signature:* _____

Parent Name (printed): _____

Player Name: _____

I/We have read, understand and agree to comply with the Social Distancing Form as outlined above.