## Player Registration Form-Original Six-Winter/Spring



Deadline to register is January 8, 2020

1)

2)3)

| ☐ Player Fee:                                                                          | \$230                                                                                                                         | ☐ Goalie: Fre                                                               | <b>Э</b> е                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |
|----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| the Franklin Park<br>Valid 2019-202<br>No refunds will b<br>This is a Novice           | yment in full war Ice Arena.  O USA Hockey e issued once to e/low C level                                                     | y Insurance num<br>he league begins.                                        | nber <u>must</u> be<br>s too advance                                                                    | d, Amex or Discover. Please make checks payable to provided before registration will be processed. ed for the spirit of the league may be removed site fpice.com                                                                                                                                                                                                                                                                                     |  |  |
| Full Name                                                                              |                                                                                                                               |                                                                             | Home I                                                                                                  | Home Phone ( )                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |
| Address                                                                                |                                                                                                                               |                                                                             | Cell Ph                                                                                                 | Cell Phone ()                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |
| City, Zip                                                                              |                                                                                                                               |                                                                             | Email_                                                                                                  | Email                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |
| Age                                                                                    | _ DOB(mm/dd/                                                                                                                  | уу)                                                                         | Position                                                                                                | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |
| 2019-20 USA H                                                                          | ockey Number                                                                                                                  |                                                                             |                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |
| Jersey Size (All I                                                                     | Players, Pleas                                                                                                                | e Circle): Adult L                                                          | arge or Adult >                                                                                         | Larger than XL needed?                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |
| Hockey Level? (E                                                                       | x: House/Trave                                                                                                                | el/AAA/College)                                                             |                                                                                                         | Years of Hockey Experience?                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |
| Please honestly r                                                                      | ank your playir                                                                                                               | ng ability 1, 2, 3 o                                                        | or 4 (1 being th                                                                                        | e weakest):                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |
|                                                                                        |                                                                                                                               | you would like to                                                           |                                                                                                         | <b>E</b> specific friend you would like on your team, pleas                                                                                                                                                                                                                                                                                                                                                                                          |  |  |
| Team Request:                                                                          |                                                                                                                               |                                                                             | Buddy                                                                                                   | Buddy Request:                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |
| Please read the and participatir for injuries you I have read and f assumption of risk | Card# ExpirationDate Total Payment Signature  rk District information in any progor your child ully understand and waiver and | on the <b>reverse</b> agram, as indicate might sustain a the important info | Park Waiv<br>side of this<br>ed on this for<br>rising out of t<br>ormation locate<br>ms. If registering | Payment in full required at time of registration. USA Hockey Insurance required before registration will be processed. Please make checks payable to the Park District of Franklin Park Ice Arena  Ter & Release Of All Claims Form carefully and be aware that in signing up m, you will be waiving and releasing all claims hat program. In the reverse side of this form, warning of risk, g via fax, my facsimile signature shall substitute for |  |  |
| Date                                                                                   | Participant                                                                                                                   |                                                                             |                                                                                                         | nature                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |

# PARK DISTRICT OF FRANKLIN PARK HOCKEY WAIVER & RELEASE

#### IMPORTANT INFORMATION

The Park District of Franklin Park is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Park District of Franklin Park continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program must recognize that there is an inherent risk of injury when choosing to participate in recreational activities.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

#### WARNING OF RISK

Hockey is a sport intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including but not limited to head/brain injury, cervical spine injury (including paralysis) and death. All hazards and dangers cannot be foreseen. The very nature of the game of hockey is hazardous and risky, including but not limited to being tripped, body-checked, cross-checked with the stick, hit with a slash, a high stick, or a thrown stick, going head first into the boards, getting pushed or checked from behind, being cut by a skate blade, colliding with goal posts, being hit by a stick, puck, or other player's protective equipment, elbowed in the head or face, collisions with other players and stationary objects, poor officiating, injuries caused by failure to wear adequate protective equipment, inadequate playing conditions, defective equipment, imperfections in the ice, failure in supervision or instruction, unsportsmanlike conduct, and all other circumstances inherent to sport of hockey. In this regard, it is impossible for the Park District of Franklin Park to guarantee absolute safety.

### WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Park District of Franklin Park, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.