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## BUCKS SPRING PROGRAM

### Central Bucks West Ice Hockey Club

#### ***WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT***

The sport of ice hockey can be a hazardous activity. In consideration of each player's participation in the sport of ice hockey, the player and his/her parents/guardians acknowledge, understand and assume the risk of playing ice hockey as it relates to the Central Bucks West Ice Hockey Club. Such activity may include try-outs, practices, power skating and games (e.g., regular season, playoffs, exhibition, scrimmages) as well as off-ice activities. Playing and viewing ice hockey involves the risk of injury that can result from various expected and unexpected causes, including, but not limited to, collisions with other players, falling, striking the ice or the boards, flying pucks and sticks as well as injury caused by the players and other spectators.

Flying pucks and sticks leaving the ice surface during games, scrimmages, practices, try-outs and other events are a common, frequent and expected risk for spectators inherent in the sport of ice hockey. Each person assumes the risk of injury that is inherent in playing and viewing the sport of ice hockey. The Central Bucks West Ice Hockey Club, its directors, officers, members, coaches, volunteers and agents have no duty to protect against injury caused by these and any other common, frequent and expected risks inherent in ice hockey.

It is also the purpose of this agreement for the players and/or parents/guardians to exempt, waive, and relieve the coaches, volunteers and board of directors of the Central Bucks West Ice Hockey Club from all liability from personal injury or wrongful death arising from participating in the club's ice hockey activities whether as a player, coach, volunteer or spectator of the sport of ice hockey.

In consideration of his/her participation in the activities of the Central Bucks West Ice Hockey Club the undersigned enter(s) into this agreement with the Central Bucks West Ice Hockey Club.

\_\_\_\_\_  
Participant Name (PRINT)

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Age

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date Signed