

**Sno-King Amateur Hockey Association  
Associate Membership (if needed)**

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_

Occupation: \_\_\_\_\_

I do hereby give my consent to any physician to perform such medical services as may be necessary because of the participation in Kingsgate Arena/Sno-King Amateur Hockey Association activities. I further hereby release, absolve, indemnify and hold harmless SKAHA, Kingsgate Arena, its employees and members, any physician. I hereby waive all claims against the aforementioned parties or any other persons appointed by them.

Special Medical Problems: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If under 18 years old  
Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Sno-King Amateur Hockey Association  
Kingsgate Arena**

**WAIVER AND RELEASE OF LIABILITY**

Printed Name: \_\_\_\_\_

In consideration of being allowed to participate in any way in the Kingsgate Arena the undersigned:

1. Agree that the parent(s) or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence, but the action, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risk and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue Sno-King Amateur Hockey Association or the Kingsgate Arena, its affiliated clubs, their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releases," from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage in property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.

**I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.**

Printed name of participant: \_\_\_\_\_

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

If under 18 years old:  
Printed name of Parent/Guardian: \_\_\_\_\_

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