

Waterloo Men's Recreational Hockey League Inc.

2020-2021 Registration Form

Personal Information (Please print legibly)

Item	On File	Correction
Name		
Address		
City		
Postal Code		
Phone		
Cell		
Email		
Birth Date DD-MM-YYYY		

Emergency Contact Information

Who to contact in case of an emergency during a game.	Name	Phone	Cell
Emergency Contact 1			
EC1 - Correction			
Emergency Contact 2			
EC2 - Correction			

Preferences

Item	Full Time	Spare			
Status					
Item	Goalie	Defence	Left Wing	Centre	Right Wing
Postion					

Fees

Prior to June 16th \$450

Spares Skaters - \$25 registration / insurance + \$10/game

After June 15th \$500

Spare Goalies \$0 registration / Insurance + \$10/game

Select	Option
	Cash - received by 15 June 2020
	Cheque payable to WMRHL - post dated 15 June 2020 or earlier
	e-Transfer to WMRHLA@gmail.com by 15 June 2020 or earlier **

** Please contact your captain or Lew Fraser for the security question and answer.

Please note that you will not be considered part of our league until you are paid in full. No persons will be allowed on the ice without payment in full and a signed waiver first. Application of late fees is based on the date funds are capable to be deposited from the registrant. No refunds once teams set in September.

New players will be accepted on a first come – first served basis. If full time spots are not available, applicants will be put into the spare pool. WMRHL reserves the right to limit registration based on open spots and player on ice ability.

All registrations subject to the acceptance of the Registrant by WMRHL Executive.

Signature: _____ Date _____

Waterloo Men's Recreational Hockey League Inc.
(WMRHL)
2020-2021
Release and Waiver Form

ACKNOWLEDGEMENT AND ASSUMPTION OF RISK

I UNDERSTAND AND AGREE that there is potential risk for injury involved in the training and participation of any physical activity. I further understand and agree that participating in hockey is a potentially dangerous activity. Bumps, bruises, scrapes, scratches and soreness are commonplace, and most participants will encounter this sort of minor injury from time to time. More serious injuries are possible, including sprains, strains, twists, cramps, and injuries of similar magnitude. The possibility of more serious injury exists, including fractured bones, broken bones, torn ligaments, though most participants do not encounter such serious injuries. There remains, despite safety precautions, the remote possibility of crippling or death. **I FREELY ACCEPT AND FULLY ACKNOWLEDGE** all such risks, dangers and hazards, resulting from my participation in any event hosted or sponsored by WMRHL or CARHA Hockey.

I am also aware that I should discuss my participation in this activity with my physician to determine the effect on my current health.

It is my right and responsibility as a participant to immediately remove myself from participation in the program and notify the nearest official, if at any time I sense any unusual hazard or unsafe condition or if I feel that I am physically, emotionally, or mentally unfit for continued participation in the program.

I have read and understand the above statement of risk. I assume responsibility for my own safety, and I understand and accept the risks involved with my participation.

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND INDEMNITY AGREEMENT

I hereby agree as follows:

TO WAIVE ANY AND ALL CLAIM that I have or may in future have against WMRHL / CARHA Hockey, its coaches, officials, members, agents, directors, officers, employees and representatives, and other participants (all of whom are hereinafter collectively referred to as "Releases").

I HAVE READ, understood and agree with the statements in the **ACKNOWLEDGEMENT AND ASSUMPTION OF RISK** portion of this document, and by assuming and acknowledging this risk, I completely absolve all **RELEASEES** from any and all liability for loss, damage, injury or expense that I may suffer, that a third party may suffer, or that my next of kin may suffer as a result of my participation in any of the activities and/or programs offered by the Releases, **DUE TO ANY CAUSE WHATSOEVER**.

I acknowledge my responsibility to ensure adequate medical personal health, dental and accident insurance coverage, as well as protection of my personal possessions.

IN ENTERING INTO THIS AGREEMENT I am not relying upon any oral or written representations or statements made by the Releases other than what is set forth in this agreement.

I HAVE READ AND UNDERSTOOD THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS OR ASSIGNS MAY HAVE AGAINST THE RELEASEE.

Date: _____ Last Year's Team: _____

Print Name: _____ Signature: _____

All players must read and acknowledge these RULES and REGULATIONS, and sign this RELEASE and WAIVER before they will be permitted on the ice