



PYH Waiver and Release of Liability - ONE TIME (guardians and coaches)

READ BEFORE SIGNING

In consideration of you or your player being allowed to participate in any way with Pembroke Youth Hockey at any rink for athletic sports programs, related events and activities, the undersigned acknowledges, appreciates, and by signing this document binds all participants, and agrees that:

1. We agree to continuous adherence to the Safety Standards for duration of the 2020-2021 PYH Season, from the time of registration through April 2021, including self-certification of the "Titan Hat Trick Test" every time anyone enters a rink.
2. The risks of injury and illness (ex: communicable diseases such as MRSA, influenza, and COVID-19) from the activities involved in this program are significant, potentially life- threatening, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and,
3. We knowingly and freely assume all such risks on behalf of our self and/or our player, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for our self and/or player; and,
4. We willingly agree to comply with the stated and customary terms and conditions for participation (see PYH COVID-19 Safety Standards). If, however, we observe any unusual significant hazard during our presence or participation, we will remove our members from participation and bring such to the attention of the nearest official immediately; and,
5. We acknowledge that we are aware that there are risks to our self and/or player of exposure to directly or indirectly arising out of, contributed to, by, or resulting from: An outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof (collectively "COVID-19");
6. In consideration of having the opportunity to participate as either a team member or competitor in the Pembroke Youth Hockey program, and in acknowledging that we are aware of and willing to assume the risks associated with this activity, we, and on behalf our heirs, successors and assigns do hereby voluntarily agree to release, waive, hold harmless and indemnify Pembroke Youth Hockey, , its individual board members, coaches, agents, volunteers and employees and any rinks used by Pembroke Youth Hockey from any and all claims, demands, damages and causes of action of any nature whatsoever, including claims arising out of or related to COVID-19 ,that we have or may have against them for, on account of, or by reason of our participation in the above activities. We indicate our agreement to this release and waiver of claims hold harmless elective noted below.

Initial: _____

“Titan Hat Trick Test” – EVERYTIME YOU ENTER A RINK (everyone)

1. I took my child’s temperature less than 2 hours before their practice or game and it was less than 100.4 degrees.
2. My child has not experienced any symptoms of COVID-19 in the past 14 days (fever, cough, shortness of breath or difficulty breathing, chills, muscle ache or pain, sore throat, or loss of taste or smell). If they have experienced these symptoms, they have since tested negative for COVID-19 since the onset of symptoms AND/OR have a doctor’s note stating that it is safe for the child to return to play.
3. My child has neither tested positive for COVID-19 in the past 14 days nor awaiting test results, and not knowingly been in close contact with anyone (including household) that has tested positive for COVID-19 in the past 14 days.

I, _____ (Print Name) understand the policies above and agree to the waiver and release of liability. I will also respect the efforts of PYH to follow all NGO, CDC, Federal, State, Local, League, and Rink Guidance. I have discussed these guidelines with other family members listed below.

Guardian / Coach Signature

Date

I AND/OR OUR PLAYER, HAS READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT OUR SELF AND/OR OUR PLAYER HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Please list (Print) additional household members:

