# Iceland Hockey Registration

Primary Household Contact: _____
Last Name First Name

Address: _____

City: _____ State: _____ Zip: _____ email: _____

Home Phone: (_____) _____-_____ Work Phone: (_____) _____-_____

| Program Code | Sec. | Program Title | Day | Fee | Registrant's First & Last Name | Age | Birth Date |
|---|---|---|---|---|---|---|---|
| | | | | $ | | | |
| | | | | $ | | | |
| | | | | $ | | | |
| | | | | $ | | | |
| | | | | $ | **Total Fees** | | |

**Child Needs Hockey Equipment Provided:** Yes No

Register for classes at:
**IceLand Ice Arena**
8435 W. Ballard Road
Niles, IL 60714
**Phone:** 847-297-8010
Iceland@niles-parks.org

**Payment Method:**
Cash
Check #: ____
Visa
Master Card

**Credit Card Information**
Name: _____ Exp. Date: _____/_____
Signature: _____ Amt.: $_____.____
CVC: _____ Zip Code Associated with the credit card: _____

## HOCKEY PROGRAM WAIVER & RELEASE

The Niles Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Niles Park District 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 Niles Park District 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 the above identified programs/activities, 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 said programs/activities (including transportation services/vehicle operation, when provided). I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, 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 all these programs/activities against the Niles Park District, including its officials, agents, volunteers and employees (here-in after collectively referred as "District"). I do hereby fully release and forever discharge the District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with these programs/activities. If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature. Additionally, by signing this form, I am certifying that I qualify for the rate charged (i.e. If resident rate was charged, I am/my children are residents of the Niles Park District). If this is proven untrue, I realize that my park district privileges may be suspended or revoked. Photos are periodically taken of participants in a class, during a special event or at the District's parks. Please be aware that these photos are for Park District use only and may be used in the District's publications.

I have read and fully understand the above important, warning or risk, assumption of risk and waiver and release of all claims. PARTICIPATION WILL BE DENIED if the signature of adult participation or parent/guardian and date are not on this waiver. **There will be NO MAKE-UPS for missed classes and NO REFUNDS issued after a class has started.**

**Signature:** _____ **Date:** _____ **Staff Initials:** _____