



***RELEASE and WAIVER***

**Goalie School Location** \_\_\_\_\_ **Date:** \_\_\_\_\_

Athlete's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province/State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: Day \_\_\_\_\_ Evening: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male / Female  
Emergency Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Insurance # \_\_\_\_\_  
Medical Alert: \_\_\_\_\_  
\_\_\_\_\_

**Part 1**

IN CONSIDERATION of the acceptance of this application, I \_\_\_\_\_, (the Applicant) for myself, my heirs, executors, administrators and assigns hereby waive any claims to which I may become entitled to for injury or damage and I hereby release CANADIAN PROFESSIONAL HOCKEY SCHOOLS, it's respective servants, organizers, sponsors, agents, instructors or employees from any and all claims, demands, damages, actions or causes of actions arising out of, or in consequence of any loss, injury or damage to my person, or property, whether personal or otherwise, incurred while in attendance at or due to my participation in or traveling to or from a hockey and/or goalie school course, notwithstanding any such loss, injury or damage may have arisen by reason of the negligence of CANADIAN PROFESSIONAL HOCKEY SCHOOLS, it's servants, organizers, sponsors, agents, instructors or employees. Without limiting the generality of the forgoing, I further release any type of recourse which I may now or hereafter have resulting from any decision of CANADIAN PROFESSIONAL GOALIE SCHOOLS.

I further state that I am in proper physical condition to participate in CANADIAN PROFESSIONAL HOCKEY SCHOOLS and am aware that participation could, in some circumstances, result in physical injury. I also give my full and complete permission for the free use of my name and picture in broadcast, telecast or written accounts of CANADIAN PROFESSIONAL HOCKEY SCHOOLS.

Athlete's Signature: \_\_\_\_\_ Date: \_\_\_\_\_