

WNY Roller Hockey League Registration Form:

www.wnyrh.com

Have you ever played in the WNY Roller Hockey League before? Yes No

How did you hear about the WNY Hockey program ? _____

INDIVIDUAL PLAYER INFORMATION (Kenan Center 2015)

First Name _____	Last Name _____	Date of Birth _____
Street Address _____	City _____	St _____ Zip _____
Phone (Home) _____	Phone (Other) _____	
_____	I _____	I _____

Player's age classification is determined as of 12/31 of previous year. Proof of Age is required. **(Youth Only)**

3 – 5 yrs old 6 – 8 yrs old 9 – 11 yrs old 12 – 14 yrs old

All WNY House League Players are required to purchase WNY Roller Hockey Membership. Any player that does not acquire the membership WILL NOT be allowed to participate until they have registered. You can fill out a brief form at the rink to register. The cost is \$30 and the Membership is valid until September 1st 2015.

What description best describes your in-line skating and hockey playing experience? **(Youth Only)**

None WNY Hockey Learn to Play Program prior house league experience Other _____

May we contact you to inform you of future beginner and Intermediate programs? YES NO

IMPORTANT!!! All mail-in registrations must be sent to WNY Roller Hockey #109 3843 Union Rd Ste.15 Cheektowaga, NY 14225. Fax registrations should be sent to (716) 634-6714 - once the form is received you will receive an email confirming that your form was received.

- Youth Skills and Drills \$110 / Goalies \$80
 Adult House League Individual \$178 / Goalies \$115 (Sunday Afternoon)
 30+ League (intended for Adult Beginner Players) \$125 per player

Visa MasterCard American Express _____
Card # _____ Exp. Date _____ CVV (3 dig) _____

Print name as shown on card _____ Signature _____

Check / Money Order # _____ Make payable to: WNY Roller Hockey

WAIVER AND RELEASE OF LIABILITY AND ASSUMPTION OF RISK

In consideration of me being allowed to participate in any way in any WNY Roller Hockey League, I agree and acknowledge:

- I understand the nature of WNY Roller Hockey League Activities and acknowledge my experience and capabilities and believe I am qualified to participate in such Activity. I further acknowledge that I am aware that the Activity will be conducted in facilities open to the public during the Activity. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
- I FULLY UNDERSTAND that: (a) WNY Roller Hockey League Activities involve risks and dangers of SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions, or inaction's, the actions or inaction's of others participating in the Activity, the condition in which the Activity takes place or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES incurred as a result of my participation in the Activity.
- I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO HOLD HARMLESS WNY Roller Hockey League, their respective administrators, directors, members, agents, officers, officials, volunteers, and employees, and other participants, any sponsors, advertisers, and if applicable, owners and lessors of the premises on which the Activity takes place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on account caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations and further agrees that if, despite this release I or anyone on my behalf makes a claim against any of the "Releasees" named above, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSE, ATTORNEY FEES, LOSS LIABILITY, DAMAGE OR COST AS MAY INCUR AS A RESULT OF ANY SUCH CLAIM.
- I also irrevocably authorize WNY Roller Hockey League and any licensee or assignee to use my name and or likeness, without compensation, in photography, video or any format for publication, sale, production, advertising in connection therewith, or any other use.
- I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND IT'S TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY THE LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOT WITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Printed name of participant _____ Signature of participant _____ Date _____

Printed name of parent (if player is under 18 years old) _____ Signature of parent _____ Date _____