

MINOR HOCKEY

YOUTH PARTICIPANT LIABILITY WAIVER

ASSUMPTION OF RISK & PARENTAL CONSENT

(Alberta, Canada)

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS

AND PARENTAL / GUARDIAN CONSENT AGREEMENT

This agreement is entered into by the undersigned parent(s) and/or legal guardian(s) of the minor participant named above (the "Participant") in favor of:

Cardston Minor Hockey Association

(the "Organization"), including its directors, officers, employees, volunteers, coaches, trainers, officials, sponsors, facilities, municipalities, affiliates, and representatives (collectively, the "Releasees").

1. ACKNOWLEDGEMENT OF RISKS

I understand and acknowledge that participation in hockey and related activities involves inherent risks, dangers, and hazards, including but not limited to:

- Collisions with players, boards, pucks, sticks, nets, or ice surfaces;
- Falls, slips, and loss of balance;
- Physical contact and body checking (where permitted);
- Injuries arising from practices, games, travel, dressing rooms, training, and off-ice activities;
- Equipment failure or improper use of equipment;
- Negligence of participants, coaches, volunteers, or others;
- Serious injury including fractures, concussions, spinal injury, paralysis, or death.

I understand that injuries may occur despite rules, supervision, protective equipment, or safety measures.

2. ASSUMPTION OF RISK

I freely accept and fully assume all risks, dangers, and hazards associated with the Participant's involvement in hockey activities, whether foreseen or unforeseen.

I acknowledge that participation is voluntary and that the Participant is physically and mentally capable of participating safely.

3. MEDICAL FITNESS

I confirm that:

- The Participant is medically fit to participate in hockey activities;

- The Participant has no condition that would make participation unsafe unless disclosed below;
- I will inform the Organization of any relevant medical concerns, allergies, or limitations.

Medical Conditions / Allergies (if any)

4. RELEASE AND WAIVER OF LIABILITY

To the fullest extent permitted by the laws of Alberta, I hereby release and forever discharge the Releasees from any and all claims, demands, actions, causes of action, damages, losses, costs, or expenses arising from or related to any injury, illness, death, property damage, or other loss sustained by the Participant while participating in Organization activities, including claims arising from negligence.

This release applies to all hockey-related activities, including practices, games, tournaments, camps, conditioning sessions, transportation organized by the Organization, and related events.

5. INDEMNITY

I agree to indemnify and hold harmless the Releasees from any claims, demands, liabilities, damages, costs, or legal expenses arising from the Participant’s conduct or participation in Organization activities.

6. MEDICAL TREATMENT AUTHORIZATION

In the event of injury or medical emergency, I authorize the Organization to obtain emergency medical treatment for the Participant as deemed necessary when I cannot be contacted immediately.

I understand that I am responsible for any medical, ambulance, dental, or related costs incurred.

Emergency Contact Information

Name: _____

Relationship to Participant: _____

Primary Phone Number: _____

Secondary Phone Number: _____

7. RULES AND CONDUCT

I understand that the Participant must follow:

- All team, rink, and Organization rules;
- Directions from coaches, officials, and supervisors;
- Applicable policies regarding conduct, harassment, bullying, abuse, and safety.

Failure to comply may result in suspension or removal from participation.

8. PHOTO / MEDIA CONSENT (OPTIONAL)

Please check one:

YES — I grant permission for the Organization to use photographs or video recordings of the Participant for promotional, educational, website, or social media purposes without compensation.

NO — I do not grant permission for photographs or video recordings of the Participant to be used.

9. GOVERNING LAW

This agreement shall be governed by and interpreted according to the laws of the Province of Alberta and the laws of Canada applicable therein.

10. ACKNOWLEDGEMENT AND SIGNATURE

I confirm that:

- I am the parent and/or legal guardian of the Participant;
- I have read and understood this agreement;
- I understand that by signing this document I may be waiving certain legal rights on behalf of myself and the Participant;
- I sign this agreement voluntarily.

IMPORTANT NOTICE

This template is provided for general informational purposes only and does not constitute legal advice. Minor waivers may have limited enforceability under Alberta law. Organizations should obtain independent legal review before implementation or distribution.