

## KIWANIS POND HOCKEY LIABILITY WAIVER AND RELEASE

*Waiver must be signed by every participant,  
for participants 18 years and under - a parent or guardian must sign the waiver.*

*Please read this form carefully and be aware that in seeking permission from Kiwanis to participate in a Kiwanis event, you will be waiving all claims for injuries you might sustain arising out of your participation. Participation in this all day hockey tournament is voluntary and at your own discretion and judgment.*

As a participant in Pond Hockey on February 1, 2020, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, damages, or loss that I may sustain. Such risks inherent to this event may include: serious bodily injury, permanent disability, and death.

I acknowledge that I am voluntarily participating in Pond Hockey. I understand the physical demands associated with my participation in Pond Hockey, including but not limited to fatigue and extended periods of time standing and/or playing. I knowingly and voluntarily assume the full risk of any injuries, regardless of severity, and including death, that I may sustain and all risk of damage to or loss of property which may occur as a result of my participation in Pond Hockey. I verify that I have recently had a complete physical examination and am in the proper physical condition to participate in Pond Hockey.

I do hereby fully release and discharge Kiwanis Foundation of Lake Bluff & Lake Forest, Lake Bluff & Lake Forest Kiwanis Club, Kiwanis International, Lake Bluff Park District, and their respective members, trustees, officers, agents, and employees from any and all claims from injuries, damages, or loss that may accrue to me on account of my participation in Pond Hockey.

I further agree to indemnify and hold harmless and defend Kiwanis Foundation of Lake Bluff & Lake Forest, Lake Bluff & Lake Forest Kiwanis Club, Kiwanis International, Lake Bluff Park District, and their respective members, officers, agents, and employees from injuries, damages, and loss sustained by me and arising out of, connected with, or in any way associated with my participation in Pond Hockey.

I have fully read and understand the foregoing. It is my express intent that this agreement shall bind the members of my family, my heirs, and assigns.

This agreement shall be construed in accordance with the laws of the State of Illinois.

I Accept the Waiver Agreement

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature Parent/Guardian (if minor playing)

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Parent/Guardian Name (printed)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date