



COOL HOCKEY EVENTS HOLD HARMLESS RELEASE FOR ALL PARTICIPANTS



Division: _____

Team: _____ Tournament: _____

Name: _____ Phone: () _____

Address: _____

City: _____ State: _____ ZIP: _____

Parent/Guardian: _____ Phone: () _____

Date of Birth: ____/____/____ Age: ____

Email: _____



RELEASE OF LIABILITY / ACKNOWLEDGMENT OF RISK..... I the applicant/We the parents or legal guardian of the above named applicant understand and voluntarily and knowingly recognize, accept and assume all risk and hazards incidental to such participation, including, transportation to and from activities and understanding these risks I/We hereby waive, release, Cool Hockey Events, and its owners, officers and the Sports Plexs/NERC absolve, indemnify and agree to hold harmless the organizers, sponsors, supervisors, participants, corporation, owners of the premises and person transporting myself/our child to or from activities for any claim arising out of an injury to me/our child. I/We understand the participation in the sport of DEKHOCKEY, STREET HOCKEY constitutes a risk to me/us including serious injury. I/We also agree to abide by the rules and regulations of the tournament and facility.

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that Cool Hockey Events has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.

I further acknowledge that Cool Hockey Events can not guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/-COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, salon staff, and other salon clients and their families.

I voluntarily seek services provided by Cool Hockey Events and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending my appointment.

I attest that:

* I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.

* I have not traveled internationally within the last 14 days.

* I have not traveled to a highly impacted area within the United States of America in the last 14 days.





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* I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.

* I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non contagious by state or local public health authorities.

* I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19.

I hereby release and agree to hold Cool Hockey Events harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the salon, or that may otherwise arise in any way in connection with any services received from Cool Hockey Events. I understand that this release discharges Cool Hockey Events from any liability or claim that I, my heirs, or any personal representatives may have against the salon with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Cool Hockey Events. This liability waiver and release extends to the salon together with all owners, partners, and employees.



PLEASE READ CAREFULLY BEFORE SIGNING Date: _____

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