I am familiar with the risk of serious injury including death which all participants in the Program must assume; I am physically, emotionally and mentally able to participate and my equipment is mechanically fit for use; I understand that all applicable rules and regulations must be followed at all times and that the sole responsibility for my safety remains with me; I take on all risks associated with potential exposure to the Covid-19 virus, and all other health and or injuries, including death by participating in this Program. I will immediately remove myself from participation and notify the on-ice official if at any time I sense or observe any unusual hazard or unsafe conditions or if I feel that I am experiencing deterioration in my physical, emotional or mental fitness for continued participation. I agree not to participate in any scrimmage if I am not feeling well, have any symptoms of fever, flu and or other related illness that could impact on others. I have read and agree to abide by the Municipal Covid-19 Safety Plan. I agree to wear all of my equipment and not remove my gloves and or helmet while on ice, on bench or traveling to and from dressing room. I agree not to share my equipment and or water bottles with other individuals. I agree to follow Municipal, Arena Rules, Guidelines & Regulations including no spitting at any time. I agree to practice social distancing at all times in the facility and while scrimmaging. I agree not to bring others into the facility to watch as a spectator and or hang out who are not part of the 9 players permitted to be in the facility as per Crazy 8 Hockey League rules, regulations and arena protocol. If in the event I have come into contact with someone who has come down with Covid-19 and or if I test positive for Covid-19, I agree to immediately contact the Program Manager Brian Brown at 604-834-0950 email: [citygate@live.com](mailto:citygate@live.com) to notify him of such events. I agree to park my vehicle 2 metres away from anyone parked in Centennial Arena’s parking lot to maintain social distancing. I agree to wash my hands thoroughly prior to entering the facility.

**THE PROGRAM** The Adult Ice Hockey Club (AIHC) is owned and operated by City Gate Contracting Ltd (CGCL) who operates the Program in the Province of British Columbia. The Program is for adult recreational ice hockey. The Program operates under its own entity. By signing this Game Day Roster/Registration form, I hereby acknowledge that I have become a member of the Program to participate in all activities of the AIHC,  I understand that there are no refunds available to me should I decide to quit the Program and or I become sick or injured. I further accept all risks of sickness, injury or death associated with playing the game of ice hockey. The Program and CGCL are not responsible for any costs incurred as a result of any sickness, injury or death that may occur while playing the game of ice hockey. I acknowledge that I have joined the Program as a participant and understand that I am to provide my own medical, dental, short or long term disability insurance should I become sick, injured or die while participating in the Program.  Participants are encouraged to provide their own insurance coverage options for medical, dental, short/long term disability to cover any potential loss of wages or other costs they may incur as a result of participating in the Program. The game of ice hockey has a high degree of serious injury, sickness associated with playing with others and/or potential death. All participants take on the full risks, should sickness, injury or death occur. I have voluntarily signed the Game Day Roster/Registration form to participate in the Program, I am assuming full Risk and hereby forever Release and Waive Liability to the City of White Rock, Sportsplex Management Ltd, Walnut Grove Arenas Ltd, City Gate Contracting Ltd and all its affiliates, and their officers, directors, owners, agents, and employees and fellow Program members arising out of or in consequences of any loss, injury, sickness or death, damage, that may have arisen by taking part in this Program and any involvement from their representatives, agents, employees or sub contractors while participating in the Program.

I understand and agree on behalf of my heirs, assigns, personal representatives and next of kin that my participation in this Program and my execution of this document constitutes: AN UNQUALIFIED ASSUMPTION OF ALL RISKS associated with participation in this Program by me even if arising from negligence, or gross negligence, including any compounding or aggravation of injuries caused by negligent rescue operations or procedures, of any program organizer and any persons associated therewith or participating there in, and A FULL AND FINAL RELEASE AND WAIVER OF LIABILITY of the Program organizer and all persons and organizations associated with it and the Program including, without limiting the generality of the foregoing, its officers, directors, officials, agents, and/or employees, other participants, sponsors, advertisers, owners and/or lessors of the premises, used to conduct the Program, sanctioning bodies, medical or rescue personnel (the “RELEASES”), of and from with respect to all injury, disability, death and/or loss or damage to person or property whether arising from negligence, or negligent rescue of or by the foregoing or otherwise, and AN UNDERSTANDING NOT TO SUE THE RELEASES for any loss, injury costs or damages of any form or type, whosoever caused or arising, whether directly or indirectly from participation of myself in the Program, and AN AGREEMENT TO INDEMNIFY, and to SAVE and HOLD HARMLESS the RELEASES, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur due to a claim made against them or any one of them whether the claim is based on negligence or gross negligence of the RELEASES or otherwise.

**DATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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I have read this document thoroughly. I understand that the RELEASES are relying upon my warranties, assumptions, waiver and