

September 17, 2020

Red Lake Falls Blue Line Club

WAIVER AND VOLUNTARY ASSUMPTION OF RISK

I am the parent of _____, _____, _____,
_____ ("my child(ren)"). I understand that the Red Lake Falls Blue Line Club offers USA and MN Hockey athletic activities directed by the head coach, and that participation in this activity is completely voluntary. I recognize and understand that participation in this activity involves inherent risks, including but not limited to the risk of contracting the novel coronavirus, also referred to as COVID-19, and the risk of physical injury or death. I also understand that these risks will exist despite careful planning and adequate supervision by the RLFBLC. Although the RLFBLC has taken measures to follow social distancing guidelines, due to the nature of some of the programs provided, it is not always possible to maintain 6-foot social distancing between students and staff at all times. Knowing the inherent risks and dangers involved, I voluntarily assume those risks and grant permission for my child to participation in this activity.

Knowing the inherent risks and dangers that are involved in participation in this activity, I waive, release, and forever discharge the RLFBLC and its current and former board members, officers, directors, employees, agents, insurers, and representatives from any and all liability, actions, claims, and demands for personal injury, sickness, death, or property loss arising out of or relating to my child's participation in this activity. I further waive any right to bring any claims, demands, legal actions, or causes of action against the RLFBLC, its board members, officers, directors, employees, agents, insurers, or representatives, unless they engage in gross negligence or willful misconduct that directly causes harm to my child.

Finally, I agree to hold the RLFBLC and its board members, officers, directors, employees, agents, insurers, and representatives harmless from any and all claims, demands, or liabilities for injury, sickness, death, or loss of property arising out of or relating to my child's participation in this activity.

I have read and understand the terms of this Waiver and Voluntary Assumption of Risk Agreement and agree to its terms.

Dated: _____

Printed Name of Parent/Guardian

Signature of Parent/Guardian

**Red Lake Falls Blue Line Club Hockey Association
Waiver Period September 1, 2020 – March 31, 2021
Waiver, Release of Liability, and Assumption of Risks**

Assumption of Risks:

I am aware that the activity I am participating in involves some risks, potentially including but not limited to: impact and collision with other persons; impact with objects or equipment; failure to play safely within one's own ability; failure to play against others of equal stature or ability; theft, negligence on the part of supervising volunteers, and exposure to communicable disease (specifically including Covid-19/Coronavirus).

I freely accept and fully assume all such risks, dangers, and hazards and the possibility of personal injury, death, property damage, and loss resulting therefrom.

I am aware that Red Lake Falls Blue Line Club does not carry accident or medical or dental insurance on my behalf.

Waiver of Claims and Release of Liability:

In consideration of the Red Lake Falls Blue Line Club's permission to use school facilities or participate in RLFBLC events, I hereby agree:

To waive all legal claims against the Red Lake Falls Blue Line Club related to the use of its facilities or participation school events and release the Red Lake Falls Blue Line Club from all liability for any loss, damage, injury, and/or expense that I may suffer as a result.

Printed Name: _____

_____ Date: _____

Printed Name of Minor Child _____ Date of Birth _____

Printed Name of Minor Child _____ Date of Birth _____

Printed Name of Minor Child _____ Date of Birth _____

Printed Name of Minor Child _____ Date of Birth _____

I sign this Waiver, Release of Liability and Assumption of Risk on my own behalf and also on behalf of my minor child legally waiving my minor child's rights in the same manner as my own.

Printed Name of Minor Child _____

Signed _____

Date: _____