

Briere's Goalie School

Athlete's Full Name: _____
Please Print Clearly

Address: _____

City: _____ **Postal Code:** _____

Telephone: Day _____ **Evening:** _____

Age: _____ **Date of Birth:** ____/____/____ **Sex:** Male Female
Year Month Day Please Circle

Emergency Contact: _____ **Telephone:** _____

Manitoba Medical #: (Or Applicable Insurance #) _____

Medical Alert: _____

Goalie School Location: _____ **Date of School:** _____

Part 1

RELEASE AND WAIVER

IN CONSIDERATION of the acceptance of this **application**, I _____, (the applicant) for myself, my heirs, executors, administrators and assigns hereby waive any claims to which I may become entitled to for injury or damage and I hereby release **BRIERE'S GOALIE SCHOOL**, it's respective servants, organizers, sponsors, agents, instructors or employees from any and all claims, demands, damages, actions or causes of actions arising out of, or in consequence of any loss, injury or damage to my person, or property, whether personal or otherwise, incurred while in attendance at or due to my participation in or travelling to or from a hockey and/or goalie school course, notwithstanding any such loss, injury or damage may have arisen by reason of the negligence of **BRIERE'S GOALIE SCHOOL**, it's servants, organizers, sponsors, agents, instructors or employees. Without limiting the generality of the foregoing, I further release any type of recourse which I may now or hereafter have resulting from any decision of the **BRIERE'S GOALIE SCHOOL**.

I further state that I am in proper physical condition to participate in **BRIERE'S GOALIE SCHOOL** and am aware that participation could, in some circumstances, result in physical injury. I also give my full and complete permission for the free use of my name and picture in broadcast, telecast or written accounts of **BRIERE'S GOALIE SCHOOL**.

Athlete's Signature: _____ Date: _____

Part 2

INDEMNIFICATION

In consideration of **BRIERE'S GOALIE SCHOOL** accepting this application, I, _____ (the athlete) agree to indemnify **BRIERE'S GOALIE SCHOOL**, it's respective servants, organizers, sponsors, agents, instructors or employees from any and all claims or demands which might be made against **BRIERE'S GOALIE SCHOOL** arising out of, or in consequence of my having attended at or participated in the **BRIERE'S GOALIE SCHOOL**, and in particular in a hockey and/or goalie school course.

Athlete's Signature: _____ Date: _____

Endorsement of School's Director _____ Accepted Not Accepted

If Athlete is under the age of 18, Parts 3 and 4 must be signed by parent of guardian: (see reverse)

Briere's Goalie School

If Athlete is under the age of 18, Parts 3 and 4 must be signed by parent of guardian.

Part 3

CONSENT AND ACKNOWLEDGEMENT

I, _____, being the parent, or guardian of the Athlete as described fully on the front, hereby have fully read the entire Release and Waiver as same as printed on the reverse, and I hereby further indicate that I fully understand the entire meaning and contents of the Release and Waiver and hereby sign same of my own free will and accord, with the full desire that the Athlete to be permitted to apply to BRIERE'S GOALIE SCHOOL and to participate in a hockey and/or goalie school course.

(Signature of parent or guardian)

Part 4

INDEMNIFICATION

IN CONSIDERATION of **BRIERE'S GOALIE SCHOOL** accepting this **application**, I _____, being the parent or guardian of the Athlete, as named in the Application on the reverse hereof, agree to indemnify **BRIERE'S GOALIE SCHOOL**, it's respective servants, organizers, sponsors, agents, instructors or employees from any and all claims or demands which might be made against **BRIERE'S GOALIE SCHOOL** arising out of, or in consequence of the Athlete, and/or my own, having attended at or participated in the **BRIERE'S GOALIE SCHOOL**, and in particular in a hockey and/or goalie school course.

Parent or Guardian's Signature: _____ Date: _____