WAIVER AND RELEASE OF LIABILITY
SILVERTIPS 5 ON 5 STREET HOCKEY TOURNAMENT

In consideration of being allowed participating in any way in Everett Silvertips athletic/sports programs, related events and activities in the Everett Silvertips Street Hockey Tournament, the undersigned;

A. Agrees that prior to participation, they each will inspect the facilities and equipment to be used and if they believe anything is unsafe, they will immediately advise their coach, supervisor, or a member of the sponsoring team's staff of such condition(s) and refuse to participate.

B. Acknowledge and fully understand that each participant will be engaged in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses, which might result not only from their own actions, inactions or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.

C. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.

D. Release, waive, discharge and covenant not to sue the Everett Silvertips, its affiliated clubs, their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event, all which are hereinafter referred to as "releases" from demands, losses, or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or part by the negligence of the release or otherwise.

THE UNDERSIGNED HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

_____ _____ _____
(Print Name) (Signature) (Date)

_____ _____ _____
(Parent's Name if participant is a minor) (Parents Signature) (Date)

_____
(Emergency Contact Number)