			20	10 Dog	iatuatia			
AR C		Welco	2018 Registration					
CA	MP			season for Burf	ord Coyotes!			
		Tues 21 ^s	st – Thurs 23 rd A	ugust	Wayne Gret	zky Sport	s Centi	re
You must be r	egistered with BI	OMHA fo	or the upcomin	g season prior t	o registering fo	r Camp Co	oyote.	
Player's name	:			Jers	ey size: YS YI	VI YL Y	'XL	AS
Age division:	Novice	!	Atom	Peewee	Bantam			
Position:	Player		Goaltender					
Medical Inform while at camp	mation: Are there? ?	e any ex	isting injuries, i	nedical conditi	ons or allergies	that may l	be a fa	ctor
Parent/Guard	ian:							
Address:								
Phone:			. Email:					
Names of eme	ergency contacts	during	camp:					
			Relationship:		Phone:			
			Relationship:		Phone:			
			Relationship:		Phone:			
to be photogra	aphed while part mp Coyote and B	icipatin	g at Camp Coyo	-				·····,
Parent/Guardi	ian sign:			Date	2:			
Office Use:	\$150 paid	YES	NO	Registered w	vith BDMHA	YES	NO	

Participant Waiver, Release and Indemnify Conditions

In consideration of the acceptance of my registration with Camp Coyote, I for myself, my heirs, executors, administrators and assigns, waive any claim to which I become entitled for injury or damage and release the Camp Coyote organizers, sponsors, representatives, their agents and employees and any other person or organization assisting in the camp, its games and events (collectively, the "releasees" from any claims for damage and or injury suffered by me as a result of my participation in (or travelling to or from) any game or event, regardless of whether or not such damage and or injury results directly or indirectly, from any act, omission, or negligence of the releasees (or any of them) and I confirm that with respect to any damage and or injury or loss whether direct or indirect consequential or other wise.

I further state that I am in proper physical condition to participate in the camp activities, on and off ice, and am aware that participation could in some circumstances result in physical injury. I acknowledge that hockey is an inherently dangerous activity and physically demanding and that the presence of referees is no guarantee that the proper rules will be enforced and even if enforced I may suffer injury.

I further release and forever discharge the releasees from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment or services rendered (or not rendered) in connection with my participation in (or travel to and from) any game or event. I understand that I am solely responsible for securing appropriate medical health or disability insurance coverage for myself. I also give my permission for the free use of my name and picture in broadcasts, telecasts or written account of league games and or events.

I agree to save harmless and indemnify the releasees form any claims, demands, damages, costs and expenses which might be made against the releasees (or any of them) arising out of, in connection with or in consequence of (or travel to or from) Camp Coyote and specifically and without limiting the generality of the forgoing, in connection with any injury suffered by me where such injury results from any cause whatsoever, or suffered by any other player, referee, or other person in attendance (or traveling to or from) a game or event where such injury was caused or contributed to by my actions.

Player sign:

Name:

Parent/Guardian sign:

Name:

Date:	• • • • • • • • • • • • • • • • • • • •
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