



EMERGENCY CARE AND MEDIA RELEASE FORM

CHILD'S NAME _____

Address: _____ Phone: _____

City: _____ State: _____ Zip _____

Allergies, Special Needs, Medications taken regularly:

EMERGENCY CONTACTS

Parent Name: _____ Employer: _____

Address: _____

Phone # 1: _____ Phone #2: _____ Phone #3: _____

Parent Name: _____ Employer: _____

Address: _____

Phone # 1: _____ Phone #2: _____ Phone #3: _____

IN THE EVENT PARENTS CAN NOT BE REACHED PLEASE CONTACT:

Contact #1: _____ Phone: _____

Contact #2: _____ Phone: _____

Physician Name: _____ Phone: _____

Insurance Company Name _____

Policy Holder Name: _____ Policy Number _____

DISMISSAL AUTHORIZATION: Every day at dismissal time the Parent/Guardian or Authorized Alternate must sign the child out. No child will be permitted to leave camp with persons other than those listed below: (for Camp use only)

Parent/Guardian #1 _____ Parent Guardian #2 _____

Alternate #1 _____ Alternate #2 _____

Emergency form (continued)

EMERGENCY AUTHORIZATION:

Prince William Ice Center has my permission to call 911, and/or send my child to the Hospital, and the medical personnel have my permission to provide treatment that a physician deems necessary for the well-being of my child. Prince William Ice Center will make every attempt to contact the Parent/Guardian/Emergency Contacts in the event of such an emergency.

Parent/Guardian Signature: _____ Date: _____

AMATEUR ATHLETIC WAIVER/RELEASE OF LIABILITY:

In consideration of being allowed to participate in any way in the sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce the risk, the risk of serious injury does exist: and
2. I knowingly and freely assume all such risk, both known and unknown, even arising from the negligence of the releases or others, and assume full responsibility for my participation; and
3. I willingly agree to comply with the stated and customary terms and conditions for the participation. If however I observe and unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
4. I for myself and on behalf of my heirs, assign, personal representatives and next of kin, hereby release and hold harmless Prince William Ice Center, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable owner and lessors of the premises used to conduct the event(release), with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releases or otherwise.

I DO _____ / DO NOT _____ give my permission to Prince William Ice Arena to use my child's photo or likeness in marketing and/or promotional materials.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS TO SIGNING IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature of participant: _____ Date: _____
(Signature of participant's legal guardian if participant is under age 18)

Please fax, email or return in person, Emergency/Waiver/Media forms to the Skating Department