

HOMER WINTER JAMBOREE
Women's Hockey Tournament
January 13th - 15th, 2012

Welcome to the Homer Winter Carnival Jamboree! This tournament is designed to mix up players of **all abilities** for a weekend of **fun**. The Jamboree will be a round robin, With final crossovers.

First Name: _____ Last Name: _____

Mailing Address: _____

City: _____ State/Country: _____ Zip: _____

Home phone: () _____ Email: _____

Age: _____ (must be 18 or older)

Emergency contact _____ phone: () _____

CURRENT USA Hockey/Canada Hockey Membership Number (required) _____

Skill level: 10-very experienced/1-beginners 10 9 8 7 6 5 4 3 2 1

Number of years played _____ Describe your skill level: (competitive, recreational, college)

Preferred Position: __Goal __Forward __Defense Can you Play on Friday Night? _____

Team you play on regularly: _____

Please list ONE Person you would like to play with: _____

Reason for wanting to play with them: _____

****Our goal is to provide fair, balanced teams. We'll try to match up players per requests, but cannot guarantee it.****

Registration Fee: \$70 if postmarked on or before December 1st, 2012

\$80 if postmarked after December 10th, 2012

Registrations will not be accepted after December 20th, 2012.

Includes 4 games; 6 teams of 11-12 players

Register early, spaces fill up fast! Players may register and be placed on a waitlist. If we cannot place you on a team from the waitlist, your registration fee will be refunded. If you register and later decide you cannot play, **your money will not be refunded**, but with sufficient notice we will try to help find a replacement for your spot.

Registrations without payment will not be accepted.

Return registration form, waiver, and check payable to HHA Divas at: PO Box 2703, Homer, AK 99603.
Questions? Call Ingrid Harrald at 299-4370 or email: iharrald@hotmail.com

ASSUMPTION OF RISK AGREEMENT AND RELEASE Homer Winter Jamboree 2011

Hazards: Hockey is a hazardous activity. Players, coaches and officials assume all risk of dangers associated with or incident to the game of hockey, including but not limited to: colliding with or being hit either on or off the ice, by other players' bodies, sticks, pucks, helmets, skates or protective equipment; colliding with or falling on or into the ice, goals, boards or other equipment.

I understand and acknowledge these hazards associated with playing and practicing hockey.

Insurance: All participants are required to be members of USA Hockey or the Canadian equivalent and thus covered by USA Hockey Insurance or the Canadian equivalent. USA Hockey's (or Canadian Hockey) insurance may not cover all costs associated with any damage incurred while playing or practicing hockey.

*I hereby attest that I am a registered member of USA/Canadian Hockey and am thus covered under USA/Canadian Hockey Insurance.*_____

*I further understand that USA/Canadian Hockey's Insurance may not cover all costs associated with any damaged incurred as a result of these hockey practices, but I agree to look only to USA/Canadian Hockey's Insurance or my personal insurance in the case of any injury I may sustain associated with these practices.*_____

Proper Equipment: All participants are required to wear minimal protective equipment while on the ice. This includes, but is not limited to: an HECC (Hockey Equipment Certification Council) approved helmet with proper fit, gloves, shin pads and elbow pads.

*I hereby attest that I have the proper protective equipment and will wear it at all times while on the ice.*_____

RELEASE (Please read carefully, print name in blank and sign and date at the bottom)

I, _____, assume all responsibility for and all risk of damage or physical injury and disabilities up to and including death that may occur as a participant in these hockey practices. I know the risks inherent in participating in, or incident to, these hockey practices and hereby waive any claim for damages by reason of injury I may sustain. I have read and initialed the above warnings of hazard and notices of required insurance and proper equipment, acknowledging my understanding and acceptance of the warnings and policies they set forth. I agree to abide by these requirements as well as the rules and regulations of the Homer Hockey Association, the Kevin Bell Ice Arena, and USA Hockey which have been established for my safety and the safety of other participants. I hereby release the organizers and coaches of these practices, and their heirs, from all claims, demands, rights or causes of action present or future, whether known, anticipated, or unanticipated, resulting from or arising out of an incident to, my participation in hockey practices.

Signature_____ Date_____