

Annual Erik F. Hoag Alumni Hockey Game

I will be attending the game				I will not be attending the game	
l wc	ould like to make tl	ne following d	onation to support	the RHS Tiger Hoo	key Program:
\$25		\$50	\$75	\$100	Other
Name			Graduation Year		
Add	ress				
Pho	ne Number		Email		
Participation Fee \$		50	Donation \$ _		Total Enclosed \$
	R	Release a	nd Consent (Please Read	and Sign)
			to participate in the eld CT, I the under		November 23, 2018 to be held at
1.	Acknowledge and fully understand that each participant and/or observer will be engaging in activities that involve risk of injury, including permanent disability and death which might result not only from their own actions, inactions, or negligence, but the actions, inactions, or negligence of others, the rules of play or the conditions of the premises, or any equipment used. Further, that there may be other risks not known to us or reasonably foreseen at this time.				
2.	Acknowledge all the foregoing risk and accept personal responsibility for the damages following such injury.				
3.	Release, waive, discharge and covenant not to sue the Winter Garden Ice Arena or RHS Boys Hockey Booster Club, their administrators, directors, agents, business affiliates, other employees of the organization, and other members, from all liabilities to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses, or damages on account of the injury, including death or damage to property whether incurred on the ice or otherwise in or about the building or grounds, caused or alleged to be caused in whole or in part as the result of participation in or observation of skating, hockey or other activities.				
	Signature	of Participant			Date