



Activities and Programs - Waiver and Release Of Liability

I, the undersigned Participant, in consideration of being allowed to participate in athletic, sports, recreational and/or fitness programs, activities and other events at Mid-Coast Recreation Center, Inc., a Maine non-profit corporation (hereinafter referred to as "MRC"), do hereby acknowledge, appreciate and agree that:

1. There are inherent risks of injury when participating in rink and other sports, recreation and fitness activities and programs at MRC, which risks are significant, including the potential for permanent or serious injury. These risks include, but are not necessarily limited to, cuts, bruises, muscular sprains, strains and tears, closed and open head injuries or trauma, concussions, dislocation of joints, broken bones, paralysis, and even death. There is also risk from being hit, tripped or otherwise injured by a puck, ball, stick, racquet or another participant and from impact or contact with hard surfaces, nets, curtains, weights, and loose balls, pucks or other objects. While rules, equipment and personal discipline and good judgment may reduce some of these risks, the risk of permanent or serious injury cannot reasonably be eliminated and does inherently exist.

2. When participating in any ice hockey program, event or activity, I understand that wearing full hockey gear is required if sticks or pucks are used on the ice. Full hockey gear includes, but is not necessarily limited to, shin guards, jock strap and cup (for men/boys), hockey pants, elbow and shoulder pads, gloves, helmet, face guard/shield and mouthguard. For non-ice hockey programs, I understand that MRC strongly encourages participants to wear appropriate protective equipment to avoid injury when skating. I further understand that MRC, its board of directors, officers, employees, independent contractors, referees, officials, and other agents (hereinafter referred to as "Releasees"), shall not be responsible to monitor or ensure that I am wearing any required or recommended protective gear and that this responsibility rests solely with me.

3. I understand that "off-ice" programs are hosted on the hard, unforgiving concrete rink surface. Proper safety equipment, including a helmet, is required for most, if not all, programs. I further understand that Releasees shall not be responsible to monitor or ensure that I am wearing appropriate protective gear and that this responsibility rests solely with me.

4. **I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the Releasees** or others, and assume full responsibility for my participation.

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5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **hereby release, hold harmless and indemnify Releasees with respect to any and all injury, disability, death, loss or damage to person or property, whether arising from the negligence of Releasees or otherwise.**

6. I further authorize MRC to call for emergency medical care for me and/or to transport me to a medical facility or hospital if it appears to MRC that I require immediate medical attention. I further authorize appropriate personnel to render emergency medical treatment to me if necessary.

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

Full Name of Participant (Print): _____ Date of Birth: _____

(One Waiver per person)

Full Name of Parent/Guardian if Participant is Minor (Print): _____

Participant's Address: _____

Primary Phone #: _____ E-Mail: _____

Emergency Contact Name: _____

Relationship: _____ Cell Phone: _____

Emergency contact is the parent/guardian listed above.

MRC may use photography/videography for promotional purposes- please select one box:

MRC has the consent for the above participant.

MRC does not have my consent for the above participant.

Participant Signature - by Parent/Guardian if Minor Participant is under age 18

_____ Date: _____

(Sign on above line)