

Bloomfield Dek Hockey – Kids League

REGISTRATION FORM:

Player Name: _____

Address: _____

Phone: _____

Email: _____

Age: _____

Birthday: _____

Position Played: _____ Goalie: _____ Shirt Size: _____

New to dek hockey: _____

Parent Name For Kids _____

I understand that there are certain risks of injury inherent in the sport of dek hockey, and I am willing to assume these risks for my child or children. I am also aware that the following protective equipment is REQUIRED in order to play in the Bloomfield Dek Hockey League: helmet with full cage, mouth piece, elbow pads, shin guards and gloves. It is my responsibility, as the parent, to ensure that my child is always using the required equipment during the games. As the parent, it is also my responsibility to watch over my child or children at all times. I also attest that my child is healthy and fully capable of handling the rigors of playing street hockey. My child has no physical impairments or handicaps that may put them or others at risk of being harmed in any way. My child has had a recent physical, indicating that my child is fit to play street hockey.

I do hereby waive, release and hold harmless the organizers of this league, its sponsors, coaches and the City of Pittsburgh for any injury that my child may suffer in the normal course of participation in the sport, and the activities incidental thereto, whether the result of negligence or any other cause.

Parent Signature _____