



Pro Ambitions Hockey, Inc.

PO Box 565, Dover Ma 02030

Location _____

VM 508-497-1089 Fax 508-785-0865

Waiver of Liability ~ 2010

Camper's Name _____

I agree that I shall provide health insurance (including a copy of an insurance coverage card or similar document) to cover any personal injury and property damage sustained by the camper while participating in any activities of or while on the premises of Pro Ambitions Hockey, Inc. or premises leased or otherwise under the control of Pro Ambitions Hockey, Inc. The undersigned assumes all responsibility for any and all risk of damage or injury that may occur to the above named player as a participant in Pro Ambitions Hockey, Inc., including practices, scrimmages, skills sessions, clinics, boarding camps, games, paintball, tournaments and other activities related to the program, including Pro Ambitions Select teams/Nashua Panthers Organization, Pro Ambitions Ponds, Twin Sticks, Inc, the Pond of Norwood and Hat Trick Training Center in Middleton MA and Hockey Skills Challenge. Additionally, the undersigned hereby releases and discharges the program, Jeff Serowik, its operators, employees, agents, supervisors, instructors and other players from all claims, demands, rights or causes of action present or future, whether known or anticipated and resulting from or arising out of incident to the undersigned participation in said program. This is also my permission to have my child admitted and attended to, for medical and dental treatment, in case of sickness or injury. I hereby grant Pro Ambitions Hockey, Inc the right to use photographs, video images and/or other media of my child for publicity, advertising and/or other commercial purposes. I understand the event may be photographed, videotaped or otherwise recorded, I agree to let the above parties use my name, photo likeness and demographic information free of charge in any manner and for any purpose in any media now known or hereafter created. Pro Ambitions Hockey, Inc. has a zero tolerance policy with respect to uncontrollable behavior, alcohol, tobacco, drugs and other controlled substances and weapons of any kind. Any participant possessing any of these will be immediately dismissed from the program and will forfeit all amount paid. By signing this release and by being enrolled in this program you assent to the enforcement of this policy and you hereby grant Pro Ambitions Hockey, Inc. the right to inspect any and all personal belongings at any time on or off premises in relation to the program. Dates, times and prices are subject to change. I understand that this document is intended to be as broad and inclusive as permitted by the laws of the state in which the Event is taking place and agree that if any portion of this agreement is invalid, the remainder shall continue in full legal force and effect. I further agree that any legal proceedings related to this waiver shall take place in the Boston, Commonwealth of Massachusetts.

Printed Name of Parent / Legal Guardian _____

(18 or older)

Signature of Parent / Legal Guardian _____

Date _____

Note: This release must be signed prior to the participation in the Program