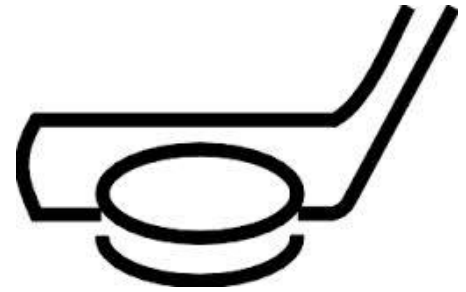


Viking Christian Hockey League

2020-2021 Adult Registration and waiver form



Registration and Consent Form

Participant's Name _____

Address _____ Phone Number _____

Would you like to receive a weekly schedule update text? _____ Cell Number _____

Allergies/Medical concerns:

Other concerns we need to be aware of

Consent:

I, the participant named above, undertake and agree to indemnify and hold blameless the Viking Christian Hockey League, Viking Alliance Church, the Western Canadian District of the Christian and Missionary Alliance and any of their representatives from and against any loss, damage, or injury suffered including COVID 19 by the participant as a result of being part of the Hockey League, as well as of any medical treatment authorized by the supervising individuals representing the church.

I have read, understood and agree with the above and sign it to cover only the registrants participation in VCHL activities both and the Viking Carena Complex and other activity locations.

Signature _____

Date _____