

**ADULT ICE HOCKEY CLUB
PERSONAL INFORMATION**

Name: _____

Address: _____

City: _____ POSTAL _____

CELL: _____

Email: _____

Birth Date: _____

THE PROGRAM

The Adult Ice Hockey Club (AIHC) is owned and operated by City Gate Contracting Ltd (CGCL). The Program is for Adult Recreation Ice Hockey played at designated arena's in British Columbia, Canada.

The Program operates under its own entity. By signing this registration form the undersigned has hereby joined the Program to participate in all activities of the Adult Ice Hockey Club and accepts all risks of injury or death associated with playing ice hockey. AIHC and CGCL owns and operates the White Rock Senior Hockey League WRSHL, White Rock Adult Hockey League WRAHL, Langley Men's Ice Hockey League LMIHL, Willowbrooke Late Night Hockey League and the West Langley New Hockey League WLNHL and the Langley Female Adult Hockey League LFAHL. The undersigned acknowledges that they are joining the Program as a full time participant and they understand that no refunds are available to them once they have registered and paid their player fee (in the event of injury, termination, suspension and or their decision to leave the program) for any reason. Registered players understand that they are to provide their own insurance for medical and or dental and that the Program and CGCL are not responsible for any costs incurred as a result of injury or death that may occur while playing the game of ice hockey. Participants are encouraged to review Canadian Adult Recreation Hockey Association insurance or other insurance coverages at their cost.

REGISTRATION FORM

Read Before Signing

**ASSUMPTION OF RISK, RELEASE AND WAIVER
OF LIABILITY INDEMNITY AGREEMENT**

IN CONSIDERATION of allowing me to participate In the Program related events and activities of **City Gate Contracting Ltd (CGCL)** doing business as the **Adult Ice Hockey Club,**

I WARRANT TO YOU THAT:

1. I am familiar with the risk of serious injury and death which any participant in this Program must assume;
2. I believe that I am physically, emotionally and mentally able to participate in this Program, and that my equipment is mechanically fit for use;
3. I understand that all applicable rules for participation must be followed and that at all times the sole responsibility for my personal safety remains with me;
4. I will immediately remove myself from participation, and notify the nearest official, if at any time I sense or observe any unusual hazard or unsafe condition or if I feel that I am experiencing deterioration in my physical emotional or mental fitness for continued participation.

I UNDERSTAND AND AGREE, on behalf of my heirs, assigns, personal representatives and next of kin that my participation in this Program and execution of this document constitutes:

1. **AN UNQUALIFIED ASSUMPTION OF ALL RISKS** associated with participation in this Program by me even if arising from negligence, or gross negligence, including any compounding or aggravation of injuries caused by negligent rescue operations or procedures, of any program organizer and any persons associated therewith or participating there in, and
2. **A FULL AND FINAL RELEASE AND WAIVER OF LIABILITY** of the Program organizer and all persons and organizations associated with it and the Program including, without limiting the generality of the foregoing, its officers, directors, officials, agents, and/or employees, other participants, sponsors, advertisers, owners and/or lessors of the premises, used to conduct the Program, sanctioning bodies, medical or rescue personnel (the "RELEASES"), of and from with respect to all injury, disability, death and or loss or damage to person or property whether arising from negligence, or negligent rescue of or by the foregoing or otherwise, and
3. **AN UNDERSTANDING NOT TO SUE THE RELEASES** for any loss, injury costs or damages of any form or type, whosoever caused or arising, whether directly or indirectly from participation of myself in the Program, and
4. **AN AGREEMENT TO INDEMNIFY, and to SAVE and HOLD HARMLESS the RELEASES, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur due to a claim made against them or any one of them whether the claim is based on negligence or gross negligence of the RELEASES or otherwise.**

I HAVE READ THIS DOCUMENT THOROUGHLY. I UNDERSTAND THAT THE RELEASES ARE RELYING UPON MY WARRANTIES, ASSUMPTIONS, WAIVER AND RELEASE, UNDERTAKINGS AND AGREEMENTS WHEN ACCEPTING MY PARTICIPATION IN THIS PROGRAM. I UNDERSTAND THAT BY SIGNING THIS DOCUMENT I GIVE UP SUBSTANTIAL RIGHTS I WOULD OTHERWISE HAVE. I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

SIGNATURE ON TOP LINE: _____ DATE: _____
Print Name under line:

Registration & Payment Information for the Adult Ice Hockey Club:

PAYMENT REGISTRATION POLICY

Full Payment of a Players fee is due in prior to being accepted for registration purposes. A player is not considered registered into any Program of the CGCL until they have provided a fully completed registration form (all fields must be completed) and that form has been signed and dated by registered player and all player fees have been paid in full.

PAYMENT:

*E-transfer league fee into citygate@live.com using hockey as code word then either, Mail in a **FULLY COMPLETED** registration form including all info required to:
AIHC, C/O Brian Brown, League President 3623 – 207B Street Langley, BC V3A 2G2

or send in a fully completed pdf copy of your registration form to citygate@live.com

Please be sure to include ***your first and last name in the misc field on your e-transfer*** if someone else or a company is paying your league fees so we know who to credit the fee to. If you are a new individual member who hasn't been placed on a team please enter ***“NEW PLAYER TO LEAGUE”*** on your etransfer. We will get you placed on a team and send you your team name and team manager contact info. Please be sure to email to citygate@live.com so we have your correct email address to provide you with proper information.

FURTHER INFORMATION

Brian Brown, League President
3623 – 207B Street
Langley, BC V3A 2G2

League Office: 604-534-9525
League Cell: 604-834-0950

Once we received your etransfer we will follow once you have been placed on a team with your team name, managers name and all contact info. You will be able to access your teams schedule on our teamsnap app in late August regarding your game dates/time etc.

All events/games/leagues/schedules/standings/rules/constitution/bylaws of the Adult Ice Hockey Club are also posted on our web page: www.adulticehockeyclub.com

FALL – WINTER LEAGUE FEE:

Individual Player Registration Fee = \$775 + GST (\$813.75)