



Hingham Girls Hockey Waiver and Release of Liability (players, parents, guardians, coaches and volunteers)
PLEASE READ BEFORE SIGNING

In consideration of Hingham Girls Hockey ("HGH") permitting you or your daughter (hereinafter "Player") to participate in any way with HGH at any rink for athletic sports programs, related events and activities at any rink, the undersigned acknowledges, appreciates, and by signing this document binds themselves and/or their Player, as follows:

1. I agree to the continuous adherence to the Safety Standards for the duration of the 2020-2021 HGH Program season ("Program"), from the time of registration through April 2021, including completing the Self-Certification Test listed below before I and/or my Player enter a rink;
2. I understand that the risks of injury from participating in the activities of and relating to the Program are significant and potentially life-threatening. While particular rules, equipment, and personal discipline and precautions may reduce these risks, the risks of serious injury and illness do exist; and;
3. I acknowledge that there are significant and potentially life threatening risks of exposure and illness to me or my Player from participating in the activities of and relating to the Program directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to, MRSA, influenza, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof (collectively "COVID-19");
4. I knowingly and freely assume all risks of injury and illness, both known and unknown, from participating in the activities of and relating to the Program, on behalf of myself and/or my Player, EVEN IF ARISING FROM THE NEGLIGENCE OR GROSS NEGLIGENCE OF HGH, or others, and assume full responsibility for myself and/or my Player; and,
5. I willingly agree to comply with the stated and customary terms and conditions for participation (see [Mass Hockey Resources](#)). If, however, I and/or my Player observe any unusual significant hazard during my or my Player's presence or participation, I and/or my Player will remove myself/my Player from participation and bring said hazard to the attention of the nearest official immediately; and,
6. In consideration of having the opportunity to participate as either a team member, coach or other volunteer in the Hingham Girls Hockey Program, I acknowledge that a) I am aware of and willing to assume the risks associated with this activity and b) I, and on behalf of my Player, heirs, successors and assigns do hereby voluntarily agree to release, waive, hold harmless and indemnify Hingham Girls Hockey, its individual board members, coaches, agents, volunteers and employees and any rinks used by Hingham Girls Hockey from any and all claims, demands, damages and causes of action of any nature whatsoever, including claims arising out of or related to COVID-19, that we have or may have against them for, on account of, or by reason of my or my Player's participation in the Hingham Girls Hockey Program. I indicate our agreement to this release, waiver of claims and hold harmless provisions.

Initial: _____

Self-Certification Test – EVERY TIME YOU ENTER A RINK (everyone)

1. I took my/my Player's temperature less than 2 hours before their practice or game and it was less than 100.4 degrees.
2. I/my Player have/has not experienced any symptoms of COVID-19 in the past 14 days (fever, cough, shortness of breath or difficulty breathing, chills, muscle ache or pain, sore throat, or loss of taste or smell). If I/my Player have experienced these symptoms, I/they have tested negative for COVID-19 since the onset of symptoms AND/OR have a doctor's note stating that it is safe for me/my Player to return to play.
3. I/my player has neither tested positive for COVID-19 in the past 14 days nor am/is awaiting test results, and have/has not knowingly been in close contact with anyone (including household members) that hav tested positive for COVID-19 in the past 14 days.

I, _____ (Print Name) understand the policies above and agree to the waiver and release of liability of HGH as set forth above. I will also respect the efforts of HGH to follow all NGO, CDC, Federal, State, Local, League, and Rink Rules, Regulation and/or Guidance.

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

I have discussed the above, including the Self-Certification Test, with other family members listed below.

Parent/Guardian/Coach or other Volunteer Signature

Date

Please list (Print) additional household members:

