

Participant Signature

Roller Hockey Alliance 2026 Weekend Warrior Form

OFFICE USE ONLY

City () - Home Phone Email Address	First Name () Mobile Phone	Midd State -	le Zip	- - - (Month	n / Day / Year Male Female	Amt. Received Paid Cash	
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Email Address	Mobile Phone))	-	Check Number	
				Work Ph	none		Date Received	
1144 1 1144 1 (4)4-1							Received by	
Weekend Warrior(\$15)	_		Player	Coach		_Referee		
or and in consideration of the undersichal and being allowed to participate nd relinquish any and all claims for articipation in RHA events, member to ctivities may continue, and by this aginary have are hereby waived, releas articipant's heirs, executors, administraticipant's heirs, executors, administraticipant (and participant's) parent(s), inderstand that roller hockey and me amages which may arise therefrom a egligence of others, including the "relitoringer opponents and these risks articipant would normally participate in articipant's parent(s)/guardian(s), if a y the negligence of participant and/cound under the rules of the RHA, inclupon written request. Participant (and pind use of roller hockey rinks and relay on y cause of action based on negligendarian of dangerous conditions existing at	in RHA events and membliability and cause(s) of a gam activities, the sport or erement any such claims ed, and relinquished, and itors, and assigns. (guardian(s), if applicable) amber team activities involved that I/we have full k easees" identified below. and dangers will increase in I/We further acknowledge, it or others, are included with a control of the carticipant's) parent(s)/legated premises and acknow ce) arising from the perfort tail rinks for negligent set.	per team activitation, includin for roller hocker, rights, and control participant (and a control part	ties, participanting for personal y, and/or actional participant's personal y, understand a participant's personal y participant's personal y participates and agree all or y release and restand that if applicable) derstand that if ure to perform tain releases, or	t (and the paral injury, proposities incident into that partial) parent(s) or and assume a erson including eserging in roller hook did dangers not the risks an relinquishmen on clause proacknowledge included withing, maintenance or negligent su	rent(s) or perty dam all thereto, cipant (an relegal guar	legal guardian(s) of pa nage or wrongful death, whenever or how ever and participant's) parent(ardian(s), if applicable) of elating to roller hockey injury, partial or total s may be caused by ed to, those arising from member team activities to us or not reasonably for described throughout the dinthe preceding parage s currently published. Contained and assume the risk tee of this waiver and rele or, supervision or contro- or instruction by release	rticipant, if applicable) was occurring to participant, at they occur and for such so, or legal guardian(s), idoes(do) so on behalf of and any member team a disability, paralysis and negligence of the participating with bigge in and age group above reseable at this time. Parais agreement, including the graph. I/We agree to ability to the series any cause of activities of said areas and for these.	aive, release arising out of n period said if applicable) my /our and ctivities, and death, and cipant or the rr, faster and the that which rticipant (and hose caused e by and be HA members are conditions on (including the failure to
f the law in any controlling jurisdiction xtent, if any, allowed by controlling la								o the full
Participant (and participant's) parent(s)/ he shall def end, indemnify and save h njuries, property damage or wrongful de	armless releasees from ar							
Participant (and participant's) parent(s) ny representation or releases, that the oller hockey to exist in its present form s not liability coverage for claims of o	y are fully advised of the n. Significant exclusions m	potential dang ay apply to the	gers of roller le Roller Hocke	hockey and ι y Alliance's	understand insurance	d these waivers and rele policies, which could aff	ases are necessary to a fect any coverage. For exa	llow amateur ample, there
articipant Name	Age			Parent or Gua	rdian Name			

Parent or Guardian Signature