

**Waiver for Rock On Ice:**

In consideration of being allowed to participate in the Rock On Ice events, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from ice skating at Rock On Ice is significant, including possibility of permanent paralysis and death, and while equipment may reduce the risk, this risk still exists; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS , both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Buffalo Youth Hockey Association Association, the Buffalo Civic Center, City of Buffalo, their officers, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lesser of premises used to conduct the Rock on Ice events, (RELEASES), WITH RESPECT TO ANY AND ALL INJURIES, DISABILITY, DEATH, or loss or damage to person(s) or property, WHETHER CAUSED BY NEGLIGENCE OF RELEASES OR OTHERWISE. I HAVE READ THIS RELEASE OF LIABILITY AGREEMENT, I FULLY UNDERSTAND ITS TERMS, I FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. FOR PARTICIPANTS UNDER THE AGE OF 18.



This is to certify that I, as a parent/guardian with legal responsibility for this participant, do consent to his/her release as provided above all the releases, release and agree to indemnify the Releases from any and all liabilities incident to my minor child's involvement in the Rock On Ice events.

Participants Name: \_\_\_\_\_

Parent/Legal Guardian (Name/Signature): \_\_\_\_\_

Date: \_\_\_\_\_