

Consent for POWER Hockey Program

This consent is given by Athlete or Athlete's parent or guardian, as applicable (hereafter referred to as "you"). By executing this consent below, you voluntarily agree that Athlete may participate in Sanford POWER Hockey training, which is being provided to Athlete as part of the Bismarck Hockey Boosters. You understand that the training includes treadmill training, stickhandling and shooting training along with pre-training and post-training performance tests.

You hereby release and agree to defend, indemnify and hold harmless Sanford Bismarck, its parent, subsidiaries and affiliates (collectively, "Sanford"), and Sanford's officers, directors, trustees, medical staff, employees, and agents from all claims, liability and damages related to or arising from the POWER Hockey training. This consent shall bind you, your heirs, successors and personal representative.

I acknowledge that I have read (or it has been read to me) and understand the information on this consent form.

Date

Signature of Athlete (if age 18 or older)

I acknowledge that I have read and understand this consent form and I consent to

_____ participating in the Sanford POWER Hockey training and testing.
(Print name of Athlete)

Date

Signature of Parent or Guardian