

Substitute Goalie Form GREATER TOLEDO INLINE HOCKEY LEAGUE



When a team enters into the Greater Toledo Inline Hockey League, the expectation is that the team will be available throughout all scheduled games slots. Requests may be submitted via this form or website only.

- This form must be turned in to the Rink Manager before the schedule contest
- Separate request forms are required for each substitute goalie request
- Requests must be submitted by the team manager ONLY
- A liability form and a \$10 processing fee must be turned in with this form

TEAM NAME:				
TEAM MANAGER:				
GOALIE NAME:				
Address:				
CITY:	STATE:	Zip:		
PHONE: H:	W:	C:		
EMAIL (REQUIRED):				
DATE OF GAME	TIME OF GAME	OPPONENT		
REASON FOR SUBSTITUTE GOALIE (ATTACH ADDITIONAL PAGES IF NEEDED)				
TEAM MANAGERS SIGNATURE				

I, THE TEAM MANAGER, ACKNOWLEDGE THAT THE ABOVE GOALIE INFORMATION IS ACCURATE. I ALSO UNDERSTAND THAT INACCURATE INFORMATION MAY RESULT IN LEAGUE PLAYOFF DISQUALIFICATION.

RETURN THIS FORM, LIABILITY WAIVER, AND PAYMENT TO:

GREATER TOLEDO INLINE HOCKEY LEAGUE: PO BOX 519 SYLVANIA, OHIO 43560-0519

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration of participating in inline hockey and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence to the Greater Toledo Inline Hockey League and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

- 1. I acknowledge that inline hockey involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, the sport of inline hockey; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
- 2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- 4. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.
- 5. In the event that I file a lawsuit, I agree to do so solely in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
- 6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. I have read and understood this document and I agree to be bound by its terms. I have read the leagues rules, regulation, and structures. I also agree to abide and follow every and all rules set forth by the GTIHL constitution, code of conduct, and rules and regulations.

Signature	Print Name			
Address	City	State	Zip	
Telephone ()		Date		
	ARENT OR GUARDIAN ADI Must be completed for partici			
In consideration of activity, I further agree to indemni on behalf of minor or are in any wa	fy and hold harmless Releasees f	rom any claims alleging ne		
Parent or Guardian	Signature		Date	