## Minnesota Hockey & Chevy Youth Hockey Clinic Release and Indemnification Form

ı,	(name of parer	nt/guardian), individually and on behalf of	my child/ward (if child is 17
or younger) identified as follows, do here			,
		( ) -	
Name of Child/Ward	Age of Child/Ward	Parent/Guardian Cell Number	-
knowingly and voluntarily accept and ass that the INJURIES RECEIVED MAY BE CON (as defined below). I acknowledge that I I camp/clinic and acknowledge and agree	ume such risk, both individually IPOUNDED OR INCREASED BY Neave been fully informed of the spased on my experience that such is participation in the hockey course.	e of hockey, including SERIOUS BODILY INJ and on behalf of my participating child/wa EGLIGENT RESCUE OPERATIONS OR PROCE safety precautions to be taken by the Rele th safety precautions are adequate under amp/clinic is wholly voluntary, that my chi on in the subject hockey camp/clinic.	ard. I expressly acknowledge EDURES OF THE RELEASEES asees at the hockey the circumstances. I
executors, heirs, assigns, and anyone au Hockey, General Motors, LLC or any of i Headway Marketing, LLC, a Georgia limit shareholders, owners, managers, memb demand, action, cause of action, suit an economic and/or non-economic losses of disability or other damage sustained by	thorized by any of them, hereby ts participating Chevrolet deale ted liability company, or any of ers, successors or assigns (colle d/or litigation, which I, my child on account of any damage to pe me and/or any minor child or w	nowledged, I, on behalf of myself, my chily release, discharge, and agree to hold hars, Select Heartland Chevy Dealers, Jack Matheir respective affiliates, agents, employ ctively, the "Releasees") from and agains /ward, or either of our heirs, executors or son or property, including but not limited ard of mine relating in any manner to the r in part, by the sole or concurrent neglig	rmless Minnesota Morton Worldwide, Inc., or vees, officers, directors, t any and all right, claim, r assigns may have for any d to bodily injury, death, e participation of my
heirs, executors, administrators or assign	s relative to my child/ward's par for obtaining and paying for an	and do not carry insurance of any kind for ricipation in the hockey camp/clinic. I furty life, accident, property or other insuranc	ther understand and
dealerships, its advertising or promotions Georgia limited liability company (collect audio recordings, including still images an likeness, and biographical information in media of every kind, nature and purpose Parties and their sponsors. I agree that to sponsors to edit, telecast, webcast, cable	al agencies including but not limitively, the "Parties"), the fully assumed videos, of me and/or my chiloconnection with any games, relation (collectively, the "Media"), include rights granted hereunder sha cast, rerun, record, publish, represented in the state of	without limitation, General Motors LLC, its ted to, Jack Morton Worldwide, Inc., and ignable, perpetual and worldwide right to lor ward and to use my and/or my child's ated programming, promotional/marketing ding for the purpose of advertising, market li include the perpetual, worldwide right or oduce, use, license, print, distribute or other devised, in whole or in part, without an	Headway Marketing, LLC, a make both visual and/or or ward's name, voice, g materials, and/or other eting and/or promoting the f the Parties and their herwise exploit the Media in
warrant that I am of age of majority and above release and that I am fully familiar and assigns. This Agreement shall be into	have every right to contract for t with the contents thereof. This erpreted and construed in accord gree and consent that jurisdiction	I authority to execute the above release on the minor in the above regard. I state further release shall be binding upon me and my dance with the laws of the State where the on and venue of all matters relating to this ate where the event is held.	her that I have read the heirs, legal representatives, e event is held without
		e and have signed it freely and voluntarily TO BE A COMPLETE AND UNCONDITIONAL	
Guardian Printed Name	Date	Guardian Signature	-
Guardian Email Address	Guardian Street Addre	ess	-