

Tara Jelley Danielson, C.E.O.  
Steve Danielson, Executive Director  
Sue Swansen, Corporate Secretary, C.F.O.



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www.RUSHfieldhockey.org

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**WAIVER AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way in the **RUSH** and/or the United States Field Hockey Association athletic/sports program and related events and activities the undersigned:

1. Acknowledge and fully understand that each participant will be engaging in activities that involve risk or serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own activities, inactions or negligence but action, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
2. Assume all the foregoing risk and accept personal responsibility for the damage following such injury, permanent disability or death.
3. Release, waive, discharge and covenant not to sue **RUSH**, and/or the United States Field Hockey Association, either of their affiliated clubs, their respective administrators, directors, agents, coaches, sponsors, advertisers, officers, volunteers and if applicable owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releases" from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damages to property, caused or alleged to be caused in whole or in part by the negligence of the releases otherwise.

***I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.***

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of Player)

\_\_\_\_\_  
(Printed Name of Player)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
(Printed Name of Parent or Guardian)