

Northern Ontario Curling Association

Youth Participant Form

(For those 17 years of age and younger)

	Category – Select all that apply		
EVENT INFORMATION Team Name: Event Name: Coach Name: PARTICIPANT INFORMATION	Bantam Girls Officiating Training Bantam Boys Coach Training Junior Men Camp/Training Session Junior Women Conference Youth Challenge Business of Curling Other		
Name:	Gender:		
Address:	City:		
Postal Code:	Date of Birth* (DD/MM/YY):		
Phone:	Parent/Guardian Name:		
Parent/Guardian Phone:	Parent/Guardian Email:		

PROOF of AGE (copy of Health Card, Driver's Licence, Passport, Birth Certificate, etc.) must be on file with NOCA one week prior to competition.

□ I confirm I am a member in good standing of a NOCA affiliated club and have paid the NOCA per capita fee.

Club: _____

City: _____

□ I confirm the above athlete and I have read the NOCA's Code of Conduct and Ethics Policy, Discipline and Complaints Policy (<u>NOCA Policy Manual available here</u>) and the Event's Competitor Guide (<u>Competitor Guides</u> <u>Available Here - See applicable category</u>), and agree to follow the guidelines and rules contained within.

□ I consent to the NOCA and their agent or appointees; photographing, videotaping, filming; and/or recording the athlete's voice; and further exhibiting, publishing and broadcasting the athlete's name or photograph, video tapes, films, or any other likeness of the athlete or any sound recordings of the athlete's voice in any promotion, reports or advertising about or in connection with the NOCA or the event. I hereby waive the right to any payments or royalties in connection with the actions described above.

□ I acknowledge that through participating in NOCA sanctioned events the athlete has become a member of the Ontario Curling Council, the Provincial Sport Organization for Curling in Ontario.

□ I have been given the opportunity to obtain independent legal advice prior to signing this agreement, and fully understand its provisions. No person has attempted to unduly influence my signing of this agreement. I have signed this agreement on my own after careful consideration of all provisions.

Participant	Signature:	
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Parent/Guardian Signature: _____



INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT

(For those 17 years of age and younger)

WARNING! By executing this document you will assume certain risks and responsibilities. Please read carefully.

1. This is a binding legal agreement. As a participant in the sport of curling and the programs, activities and events of the Association, the undersigned acknowledges and agrees to the following terms:

Disclaimer

2. The Northern Ontario Curling Association ("NOCA") and their directors, officers, members, employees, coaches, volunteers, officials, participants, agents, sponsors, owners/operators of the facility, and representatives (the "Organization") are not responsible for any injury, personal injury, damage, property damage, expense, loss of income or loss of any kind suffered by the Participant during, or as a result of, the sport of curling, any program, activity or event of the Organization, caused by the risks, dangers and hazards associated with the sport of curling and the programs, activities and events of the Organization.

□ I have read and agree to be bound by paragraphs 1 and 2.

Description of Risks

- 3. I am participating voluntarily in the sport of curling and the actives, events and programs of the Organization. In consideration of my participation in the programs, activities and events of the Organization, I hereby acknowledge that I am aware of the risks, dangers and hazards associated with or related to the sport of curling and any such programs, activities and events of the Organization and may be exposed to such risks, dangers and hazards which can be sever and even fatal. The risks, dangers and hazards include, but are not limited to, injuries from:
 - a) Executing strenuous and demanding physical techniques in curling;
 - b) Dryland training including weights, running and massage;
 - c) Strenuous cardiovascular workouts;
 - d) Exerting and stretching various muscle groups;
 - e) Being struck by a broom, brush or curling stone;
 - f) The failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
 - g) Physical contact with other participants, spectators, equipment and vehicles;
 - h) Running or sliding on the ice surface;
 - i) Falling while delivering the curling stone, skipping or sweeping;
 - j) Falling because of slippery ice, or uneven or irregular ice surfaces;
 - k) Spinal cord injuries which may render me permanently paralyzed;
 - I) Stepping onto the ice surface from the walkway or onto the walkway from the ice surface;
 - m) Stepping over dividers that divide one sheet of ice from the next;
 - n) Weather conditions which may result in hypothermia;
 - o) Travel to and from competitive events and associated non-competitive events which are an integral part of the organization's activities.

□ I have read and agree to be bound by paragraph 3.

Release of Liability

- In consideration of the Organization allowing me to participate in the sport of curling and the programs, activities and events of the Organization, I agree:
 - a) That my physical condition has been verified to participant in the activities, events and programs of the Organization by a medical doctor;
 - b) To freely accept and fully assume all such risks, dangers and hazards and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from my participation in the sport of curling and the activities, events and programs of the Organization;
 - c) To forever release the Organization from any and all liability for any and all claims, demands, actions and costs that might arise out of my participation in the sport of curling and the activities, events and programs of the Organization.

□ I have read and agree to be bound by paragraph 4.

Acknowledgement

5. The Parties acknowledge that they have read this agreement and understand it, that they have executed this agreement voluntarily, and that this agreement is to be binding upon themselves, their heirs, executors, administrators and representatives.

Participant Signature:	 Parent/Guardian Signature:	 Date:_

Please print, sign and return this form to the NOCA office one week prior to the start of the first competition.

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