



## Bruno Zarrillo Youth Hockey Academy Parent's/Guardian's Release, Waiver, and Indemnity

In consideration of Bruno Zarrillo's Hockey Services accepting the Application of the child/children specified below as a participant in the camp activities, the undersigned, being the parent or guardian of the child/children, do hereby waive and release Bruno Zarrillo's Hockey Services, and all employees, servants, and agents, from any and all claims, actions, causes of action, injury, losses or damages, which may be suffered by the child/children as a result of, or connected with, participating in the activities of the camp, including, but not limited to, claims arising from or connected to negligence of the camp, participation in the activities of the camp, or the actions of the employees, servants, or agents of the camp. Hockey, and its associated activities, is inherently dangerous and all risk of all injury, loss or damage to the child/children is assumed by the undersigned.

The undersigned agree to indemnify and hold harmless Bruno Zarrillo's Hockey Services and all employees, servants, and agents from any and all claims, actions, causes of action, injury, losses or damages, which may be made by the child/children, or anyone on behalf of or account of the child/children, directly or indirectly related to or associated with the activities of the camp.

### **Names**

Child's Name: \_\_\_\_\_ Birth Year: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_

### **Address**

Street: \_\_\_\_\_  
City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### **Contact Info**

Email: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Emergency Telephone: \_\_\_\_\_

### **Special Health Concerns:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Bruno Zarrillo Youth Hockey Academy 2022 On-Ice Hockey Camp Application Form

**Child's Name:** \_\_\_\_\_

Choose which program you are registering for

Camp	# of Sessions	Dates	Fee (GST Included)
<input type="checkbox"/> U 13 2010,11 Players	6	September 10 <sup>th</sup> to first tryout	\$240.00
<input type="checkbox"/> U 15 2008,09 Players	6	September 10 <sup>th</sup> to first tryout	\$240.00
<input type="checkbox"/> U 18 2005,06,07 Players	6	September 17 <sup>th</sup> to first tryout	\$240.00
<input type="checkbox"/> U13/u15 A1/A2 (Female)	6	September 6th to first tryout	\$240.00
<input type="checkbox"/> U13 AA Prep (Male)2010,2011	5	August 29 <sup>th</sup> to first tryout <sup>st</sup>	\$200.00
<input type="checkbox"/> U15 AA Prep (Male) 2008.09	5	September 5 <sup>th</sup> to first tryout	\$200.00
<input type="checkbox"/> U18 AA Prep 2005,06,07	5	September 12 <sup>th</sup> to first tryout	\$200.00
<input type="checkbox"/> Shooting Clinic	2	August 29 <sup>th</sup> to September 1st Or Sept 6 <sup>th</sup> to September 9th	\$135.00
<input type="checkbox"/> Battle Camp	2	Same as above dates	\$135.00
<input type="checkbox"/> Power Skating	2	Same as above dates	\$135.00

**10 sessions will be held on Labour Day weekend (Friday, Saturday and Sunday). There may be sessions scheduled for Monday September 5<sup>th</sup>, 2022**

**Please Note:** Refunds will not be granted after Wednesday, August 15<sup>th</sup>, 2022 unless accompanied by a medical certificate and are subject to a \$75.00 administration charge.

**Return completed Waiver Form, Application Form and Payment\*\* to: email [brunoz@shaw.ca](mailto:brunoz@shaw.ca) or mail**

Bruno Zarrillo  
14 Commodore Rise  
East St. Paul, MB R2E 0K7

**Please Post date cheques or etransfer to August 15<sup>th</sup>, 2022**

**Contact Us:**

**Phone:** (204) 667.0920  
**Email:** [brunoz@shaw.ca](mailto:brunoz@shaw.ca)  
**Web:** [www.brunohockey.ca](http://www.brunohockey.ca)