



PLAYER PLEDGE SHEET

PLEASE NOTE: ONLINE pledging will close at 12:00 PM noon on December 23, 2024; cash and cheque pledges will still be accepted at Tournament Registration

Player's Name	
Address & Postal Code	
Phone Number	
Email	
Division/Level	
Team Name/Sponsor	

PLAYER INCENTIVES	
\$75	Hockey for Hospice Water Bottle
\$150	Hockey for Hospice Hoodie
\$200	Hockey for Hospice Water Bottle & Hoodie

PHOTO RELEASE FORM: This confirms the agreement between you and The Hospice of Windsor and Essex County, Inc. regarding the use of your image in approved Hospice of Windsor and Essex County, Inc. materials for which you may be photographed or videotaped by your consent as given in this form. For valuable consideration received, you hereby irrevocably grant to The Hospice of Windsor and Essex County, Inc. perpetually, exclusively, and for all media throughout the world (including print, non-theatrical home video, CD-ROM, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footage taken of you as requested. You hereby agree that you will not bring or consent to others bringing claim or action against The Hospice of Windsor and Essex County, Inc. on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on you, violates any other right whatsoever, including, without limitation, rights of privacy and publicity. You hereby release The Hospice of Windsor and Essex County Inc., its directors, officers, successors and assigns from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that you may hereafter have against The Hospice of Windsor and Essex County, Inc. in connection with the Property. This agreement shall not obligate The Hospice of Windsor and Essex County, Inc. to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. The Hospice of Windsor and Essex County, Inc. shall have the right to assign its rights hereunder, without your consent, in whole or in part, to any person, firm or corporation.

DATE: _____

PARTICIPANT/PARENT OR GUARDIAN SIGNATURE: _____

PLEDGE SHEETS MUST BE SUBMITTED TO REGISTRATION BEFORE YOUR FIRST GAME ON DECEMBER 27TH



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Player's Name		Sheet #	
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PLEASE PRINT CLEARLY FOR TAX RECEIPT PURPOSES (which can only be issued for pledges of \$10 or more)

Sponsor Name	Full Address	Postal Code	Phone	Pledge Amount	Receipt Yes No	

PLEDGE SHEETS MUST BE SUBMITTED TO REGISTRATION BEFORE YOUR FIRST GAME ON DECEMBER 27TH