



Teamwork • Community • Supporting Hockey

Sportsmanship • Integrity • Empower

*John Bartholmy, Pres.
Jen Fairbanks, V.P.
Lisa Klatt, Treas.
Sharon Owen, Sec.*

Vikings Blue Line Club – Release Form

Captains Practice Sessions 2009-10 Season

Player name: _____
Please Print Players Name

I, _____
Please Print – Parent (guardians) Name

As parent or guardian of the above mentioned player, I authorize him to take part in the 2009-10 captains practice sessions. I understand that the VBLC is not responsible for any of the activities at these sessions. I also authorize any emergency medical treatment deemed necessary by a licensed physician or hospital in Minnesota. I will not hold the Vikings Blue Line Club responsible for accidents or injury that may occur while participating in any on or off ice activities during these sessions.

Signature _____ Date _____