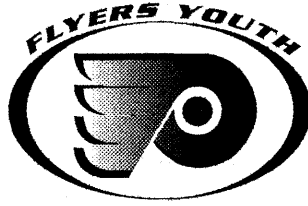


Flyers Youth Hockey Club



BLANKET WAIVER FORM

INSTRUCTIONS: This form applies to all players under contract with Flyers Youth Hockey Club who wish to participate in any private lessons, skill development or recreational clinic, league or other program sponsored by a rink or other ice hockey organization within the Atlantic District.

Flyers Youth Hockey Club will not pursue or support any claim of tampering against any coach on the ice for the clinic or program listed below as it relates to players under contract with Flyers Youth Hockey Club prior to April 6, 2009.

Flyers Skate Zone Clinics

(Please identify the name of the person/rink offering program and name of program.)

IMPORTANT NOTICE:

I understand that if a player currently registered or under contract with Flyers Youth Hockey Club participates in the on-ice clinic or program listed above, I must first obtain **WRITTEN** permission from Flyers Youth Hockey Club **BEFORE** the player participates in this program. I further understand that if a player under contract with Flyers Youth Hockey Club steps on the ice with **BEFORE** I obtain written permission from Flyers Youth Hockey Club, the program's staff may be subject to a District or League suspension. This waiver is not a release from Flyers Youth Hockey Club but strictly a waiver to attend the above named program.

Date Signed:

(Signature of program's authorized representative)

****PERMISSION FORM - FOR FLYERS YOUTH USE ONLY****

I, Steve Horvath, am President or President's authorized representative of the FLYERS YOUTH HOCKEY CLUB and I grant blanket permission for Flyers Youth players to participate in this clinic or other on-ice program.

Dated:

3/18/09