

Waiver

I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against **Anthony's Summer Volleyball Tournament** and sponsors, coordinating groups and any individuals associated with the event, their representatives and assignees, and will hold them harmless for any and all injuries suffered in connection with this event. I attest that I am physically fit to compete in this event. Further, I hereby grant full permission to any and all of the foregoing to use my likeness in all media including photographs, pictures, recordings or any other record of this event for any legitimate purpose.

By registering a child under 18, you are consenting to the collection of the child's information that you are providing for the purposes of registration and waiver.

Participant's Name: _____ Date: _____

Parent's Signature: _____ Date: _____

Participant Information

First Name _____

Last Name _____

Team/Captain Name _____

Email _____

Gender _____

Birthdate (Month/Date/Year) _____

Phone _____

Street Address _____

Town _____

State _____

Zip _____

PLEASE PRINT AND BRING A COPY OF THIS WAIVER TO THE TOURNAMENT!