

First Name: \_

## **PUMA BADMINTON TOURNAMENT - 2016**

Shahph Puma Sports Club

www.shahphpuma.com; <a href="Phone: 647-830-4663">Phone: 647-830-4663</a> http://www.facebook.com/PumaSportsClub

Adults: Sunday May 22, 2016

## LIABILITY RELEASE AND WAIVER FORM

Every participant must have a completed and signed release form to turn in at registration in order to participate

Last Name: \_\_

Address:	City:
Home Phone # ()	
WARNING: CAUTIONARY NOTICE	AND WAIVER OF LIABILITY
participant bears the responsibilit involve voluntary and involuntary economic, personal, or conseque with allergens, pathogens, or othe	that though the Shahph Puma Sports Club has taken reasonable measures to ensure a safe environment. The y to assess and assume the risk of participating PUMA'S Badminton Tournament. Badminton is a sport that may y competition exposing participants to risk of serious injury (injuries) and loss or damage direct or indirect, ntial (damage). Participation PUMA'S Badminton Tournament may include the risk of contact by participants er substances harmful to the participant due to pre-existing medical conditions including allergies, asthma and treatment of which is solely the responsibility of the participant.
	t Shahph Puma Sports Club, or its Affiliates, Volunteers and Sponsors, take no responsibility for injury or damage, y the participant however caused, whether by deliberate or negligent conduct of the participant, spectators, ts Club Affiliates.
arising from injury or damage suf	Shahph Puma Sports Club Affiliates are not held liable for compensation for damage, including claims or suits ffered by the participant or other persons however caused. The participant acknowledges that Shahph Puma le for any personal lost or damaged items any time before, during, or after the tournament. The participant rules of the tournament.
information as it is required to co	es the undersigned's consent and acknowledgement that Shahph Puma Sports Club must collect personal mplete this registration form for the following purposes: administrative and insurance purposes
	ge or younger will be required to sign this portion of the form: gal Guardian or Player over 18 years of age agree to abide by the rules as stated.
Name:	Print Parent/Guardian Name:
Date:	Signature of Parent/Guardian:
All participants must fill out and	
	, understand the Conditions of Registration and Warning and the Personal Information statement set out a gree to the conditions, as stated above. I certify that all the information provided by me on this registration
Signature	Date
Time: 8.00AM - 6.00 PM; Place	: Sandalwood Heights Secondary School