



To: Participants in Get A Clue 2008
Subject: Waiver of Liability

March 29, 2008

As participants in Get A Clue 2008 you will be responsible for your own actions. Please sign below to indicate that you understand the risks and dangers inherent in participating in Get A Clue and that you understand that in order to be permitted to participate, you must waive your right to hold Game Control, the Georgia Institute of Technology, the Georgia Tech Band, or any venue or operator liable for any injury or damage that you may suffer while participating in Get A Clue. Game Control will not be held responsible for any violation of local, state or federal law.

Having read and understanding the preceding paragraph, I hereby voluntarily release Game Control, the Georgia Institute of Technology, the Georgia Tech Band, and all venue owners and operators from any and all liability resulting from my participation in Get A Clue.

I understand and agree that I am releasing not only the entities set forth in the paragraph above, but also the officers, agents and employees of those entities. I understand and agree that this waiver applies to personal injury, property damage, or wrongful death that I may suffer, even if caused by the acts or omissions of others. I understand and agree that by signing this waiver, I am assuming full responsibility for any and all risk of death, personal injury or property damage suffered by me while participating in Get A Clue. I understand that this waiver is binding to me, my spouse, my heirs, my personal representative, my assignees, my children, and any guardian ad litem for said children. I understand that by signing this waiver, I agree to release, indemnify, and hold Game Control, the Georgia Institute of Technology, the Georgia Tech Band and all venue owners and operators, their officers, agents or employees harmless from any and all liability or costs, including attorney fees, associated with or arising from my participation in this event. I understand that if I am signing this waiver on behalf of my minor child that I will be giving up the same rights for said minor as I would be giving up if I signed this document on my own behalf. I acknowledge that I have read this waiver and that I understand the words and language in it. I have been advised of the potential dangers incidental to participation in Get A Clue.

Signed,

Team Captain (print and sign)

Player (print and sign)

Player (print and sign)

Player (print and sign)

Player (print and sign)

Player (print and sign)

Player (print and sign)

Player (print and sign)

As members of _____
Team Name



TEAM REGISTRATION FORM

MARCH 29

Team Name: _____

Vehicle Make and Model: _____

License Plate Number: _____
Please include the State if it is not a Georgia License Plate

Driver Information:

Anybody who will be driving during the course of the day must fill this out:

Driver # 1 Name: _____ DL state and Number #: _____

Driver # 2 Name: _____ DL state and Number #: _____

Driver # 3 Name: _____ DL state and Number #: _____

Team Information

(include any cell phones that will be used during the game and indicate which will be the primary contact number for your team)

Captain: _____
(name) (cell phone)

Player 2: _____
(name) (cell phone)

Player 3: _____
(name) (cell phone)

Player 4: _____
(name) (cell phone)

Player 5: _____
(name) (cell phone)

Player 6: _____
(name) (cell phone)

Player 7: _____
(name) (cell phone)

Player 8: _____
(name) (cell phone)



EMERGENCY CONTACT SHEET:

All players must fill out this form to participate

MARCH 29

Captain: _____

Emergency Contact: _____

Telephone Number: _____

Address: _____

Player: _____

Emergency Contact: _____

Telephone Number: _____

Address: _____

Player: _____

Emergency Contact: _____

Telephone Number: _____

Address: _____

Player: _____

Emergency Contact: _____

Telephone Number: _____

Address: _____

Player: _____

Emergency Contact: _____

Telephone Number: _____

Address: _____

Player: _____

Emergency Contact: _____

Telephone Number: _____

Address: _____

Player: _____

Emergency Contact: _____

Telephone Number: _____

Address: _____

Player: _____

Emergency Contact: _____

Telephone Number: _____

Address: _____
