

NYMini2019 WAIVER & RELEASE OF LIABILITY

l,	(Print Name) acknowledge that physical and mental limits and that my pa	at volleyball or any sporting event is a
potential death, serious in	jury, or property damage. With a full under PARTICIPATING OR OFFICIATING IN A	rstanding of the potential risks, I HEREB
	g action for myself, my executors, administ . EASE, AND DISCHARGE from any and a	
injury or damages of any	kind which arise out of or relate to my trave	ling to and from or my participation in an
	LLOWING PERSONS OR ENTITIES: NYI ees, representatives, and agents of any of the second	
of the persons or entitie	s listed above for any of the claims or li	abilities that I have waived, released o
) I INDEMNIFY AND HOLD HARMLESS iabilities assessed against them as a result	
·	·	
Team Name	Team City	□ Men's
Participant's signature (regardless of age)	Date
	Will you be 18 years of age by	tournament date? ☐ YES ☐ NO
Participant's DOB (MM-I		
	years of age, a parent or guardian mus e following, for and on behalf of the mir	
guardian or legal guardiar		ÿ .
([minor's name]) executes t	he foregoing Waiver and Release for and
	ned herein. I hereby bind myself, the mino present that I have legal capacity and auth	
	e to indemnify and hold harmless the pers	
	liabilities assessed against them as a resu on behalf of the minor in the execution of the	
my child's participation in		ne waiver and release. Trully consent to
	PARENT/GUARDIAN	
D. C. IN		
Printed Name	Signature	Date Signed