

TNMT 2021 – 9/18/21 AND 9/19/21

WAIVER, RELEASE and ASSUMPTION OF RISK

In consideration of my participation in the Tom Nicholson Memorial Tournament (hereinafter referred to as the TNMT), I _____ (name) hereby waive, release and discharge all claims for damages for death, personal injury, or property damage which may occur as a result of my participation in the TNMT softball tournament incident, or any activity incident thereto. This release discharges in advance the TNMT, their officers, agents, servants, committee members and employees, game officials and umpires (hereinafter referred to collectively as “Released Parties”) active or passive negligence or carelessness. I acknowledge that some recreational activities, including softball, involve an element of risk or danger of accidents, injury and even death, and knowing those risks, I freely and voluntarily assume the risk of injury and/or death and I promise not to sue or exercise any legal right to seek damages from the “Released Parties”. By this agreement, I also intend to waive, release and discharge all claims for personal injury, death or property damage caused by the condition of the softball field, lights or any equipment therein including bases, balls, bats, mitts, helmets, and fences.

I understand that this WAIVER, RELEASE and ASSUMPTION OF RISK form will remain on file with the TNMT office and that it will apply to the current tournament only.

I certify that I have no medical condition that would cause participation in the TNMT to increase the risk of hazard to my health. In addition, I authorize the “Released Parties” to provide or cause to be provided such medical treatment that may be necessary or appropriate if I am injured while participating in the TNMT.

I have read and understand the rules and guidelines of the TNMT and agree to abide by them. I understand that failure to abide by these rules may result in my expulsion from the game and/or the TNMT entirely.

Please print clearly

Signature

Printed Name

Date

Date of Birth

T-Shirt Size

Phone (_____) _____ E-mail _____

Check box if you want to MANAGE a team
What is position preference? (no guarantee on positions) _____

****You must submit this form in order to participate in the TNMT****

This document also serves as your Player Registration Form.

\$30.00 on or before July 30th

\$40.00 on or after July 31st

Mail Check to:
Laura Nicholson
5902 W. Quintale Drive
Meridian, ID 83646

VENMO Payment to:
@laura-nicholson-21