

WAIVER OF LIABILITY, ASSUMPTION OF RISK, & PARENTAL CONSENT

You must complete and sign this form in order for your child to participate in the Northwoods Tournament Series.

By signing below, the undersigned hereby certifies that I am the parent or legal guardian of the child named below (the "Participant"). I further certify that the Participant is in good physical and mental health and is physically and mentally capable of participating in the Northwoods Tournament Series and all related activities and events (the "Tournament").

I hereby acknowledge my understanding that the activities that will occur during the Tournament involve a certain amount of risk to the Participant, and, as a condition to the Participant's participation in the Tournament, I, for myself individually and on behalf of the Participant, our heirs, executors, and administrators, hereby agree to assume all such risk or loss, damage or injury to the person and property of the Participant and to release and indemnify Northwoods Tournaments, LLC, its owners, directors, officers, members, partners, staff, agents, consultants, employees, independent contractors, volunteers, the host school and the host facility (the "Released Parties"), from any and all liability, claims, demands, actions, and causes of action arising out of or related to any loss, personal injury, disease, illness or property damage that may be sustained or occur during participation in (including periods of rest or other activities related to) or otherwise be associated with the Tournament and any duties or the breach of any duties that the Released Parties have or are alleged to have to the Participant or the undersigned in connection with the Participant's transportation to, transportation from, participation, lodging, meals and medical decisions relating to the Tournament, whether or not such damages, injury or loss is due to the negligence, strict liability or other legal fault of one or more of the Released Parties.

I hereby give permission to Northwoods Tournaments, LLC, its owners, operators, volunteers, athletic trainers, independent contractors, staff, the host school and the host facility to seek medical treatment for the Participant at their sole discretion, with the understanding that Northwoods Tournaments, LLC and/or the host school and host facility will make all reasonable efforts to promptly contact a parent or guardian in the event such treatment appears to be needed. I understand that none of the Released Parties nor anyone connected with the Tournament will assume any responsibility for accidents, medical, dental, or other expenses incurred as the result of accidents sustained during, or as a result of, any activity related to the Tournament, and that I will be responsible for all costs of medical attention provided.

I understand that the Participant must be covered by their own medical insurance during the Tournament.

It is the responsibility of the Participant to have any medications that they require (such as medications for diabetes, asthma, bee sting allergy, etc.) available to them at all times during the course of the Tournament. Neither Northwoods Tournaments, LLC nor the host school or host facility will not be responsible for providing any medications that may be required by the Participant.

Signature Required:

Name (Printed): _____ Participant Name (Printed): _____

Signature (must be 18 or older): _____