

INDIVIDUAL SIGN-UP FORM

Players Name _____

Address, City, St, Zip _____

Sex _____ D.O.B. _____ Grade _____ Age _____

Phone _____

Event (Sport) _____

Parent Interested In Coaching (Circle) Yes No

If Yes Coaches Name _____

Contact Number # _____

Triple Threat Sports Participation Form

Release of Liability and Assumption of Risk Agreement

All team fees and or individual players' fees must be paid before a player is eligible to compete. Any player or coach found participating under an assumed name; false address or false working site shall be suspended immediately.

In consideration of being allowed to participate in any way in the program, related events and activities. I the undersigned acknowledge appreciate and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis or death.
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF TH RELEASE OF OTHERS, and assume full responsibility for my participation.
3. I willingly agree to comply with the terms and conditions for participation. If I observe and unusual significant hazard during my presence or participation, I will remove myself from participation and bring such attention to the nearest official immediately.
4. I, for myself and on the behalf of my heirs, assigns, personal representatives and next of kin, HERBY RELEASE , INDEMNIFY AND HOLD HARMLESS, Triple Threat Sports, L.L.C., its officers, officials, agents, and or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors premises used to conduct the event (RELEASES), from any and all claims, demands, losses, and liability arising out of or related to any INJURY, DISABILITY, or DEATH I may suffer, or loss or damage to person or property. WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASES OR OTHER, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

This is to certify that, I as the parent/guardian with legal responsibility for this participant do consent and agree to his/her release as provided above of all the releases, and for myself, my heirs, assigns, and next of kin. I release and agree to indemnify and hold harmless the releases from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES, to the fullest extent permitted by law. All signatures taken at far right of agreement.

PARENT SIGNATURE _____ **Date:** _____

E-mail _____