



TRICIA Ping Pong Tournament 2017

Registration & Waiver Form

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A PARTICIPANT OF THE TRICIA PING PONG (TABLE TENNIS) TOURNAMENT DO HERE BY SOLEMNLY SWEAR AND AGREE TO ABIDE, ADHERE AND UPHOLD ALL CONDITIONS, AGREEMENTS, RULES, REGULATIONS AND PROVISIONS WHICH HAS BEEN SET FORTH BY THE PROMOTER AND ORGANIZER IN THE PING PONG TOURNAMENT COMPETITION. AS A COMPETITOR OF THE GAME, I WOULD DISCIPLINE AND SPORTSMANSHIP NO MATTER IF I WIN OR LOSE BUT WHAT COUNTS MORE IS HOW I SOLEMNLY SWEAR AND DELCARE TO PRESERVE THE TENETS AND PRECEPTS OF A TRUE SPORTSMAN. A TRUE AND AN HONORABLE PLAYER OF THESE MODERN DAYS IN THOUGHTS, IN WORDS AND IN DEEDS SO HELP ME GOD.

Medical Waiver:

Participation in recreation sports/activities may involve the risk of injury. As a participant, I am aware of these hazards and my ability to participate. In consideration for participation in the tournament, I hereby for myself, my heirs, executors, and administrators waive and release all right and claims against the TRICIA or YMCA-Guilderland, their officers, employees, agents, volunteers and supervisors, from all losses, injury, damages, fee and other expenses, arising out of or in connection with participation in this activity.

In addition, I give permission to be treated by qualified medical personnel in the event of injury. All attempts will be made to contact any individual listed as contact person with TRICIA/YMCA. I am sole responsible for medical bills. TRICIA or YMCA will take pictures or videos of participants at our programs, activities, or special events. Please be aware that the picture may appear in future promotional materials, including our brochures.

Note: One Form is enough per family.

Names of All Players from your Family, participating in this tournament:

Signature/s of Players/Parents: _____

Date: _____

Emergency Contact Name: _____ Emergency Contact No: _____

TRICIA Officer Name: _____ Date: _____