

PARTICIPANT WAIVER OF RESPONSIBILITY FORM

I, the undersigned, by participating in the **April 7, 2018 Basketball Tournament** sponsored by **Gatesville Youth Sports Association, Inc.** understand and agree that such activity has certain inherent risks that can and do result in injury that can be serious, life limiting, and life threatening.

I, the undersigned, agree to release **Gatesville Youth Sports Association, Inc.** and the **Gatesville Independent School District**, its' elected officials, employees or volunteers from all claims resulting from any and all injuries sustained while participating in the **April 7, 2018 Basketball Tournament**, except that arising out of the sole negligence of the **Gatesville Youth Sports Association, Inc.** or **Gatesville Independent School District**, its elected officials, employees or volunteers.

If participant is a minor (under the age of 18), a parent or legal guardian must sign this form.

Name of Participant (**PRINT**)

Signature (**IF 18 or OLDER**
Signed)

(Date

Name of Parent/ Legal Guardian - if participant is less than 18 years old (**PRINT**)

Signature of Parent/Legal Guardian
Signed)

(Date

