

HS ALL-STAR Game      Participation Waiver

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Name \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_

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Grade in school (2008-09)      **School Attending in the FALL**

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**E-mail**

**Emergency information:**

**Contact Name:** \_\_\_\_\_

**Contact Phone Number:** \_\_\_\_\_

**Insurance Provider:** \_\_\_\_\_

**Policy Number:** \_\_\_\_\_

*By signing below, I give my permission for \_\_\_\_\_ to participate in the Ultimate "Showcase Game" that will be held at HOUSE PARK, and AISD athletic facility, on Friday, June 5<sup>th</sup> (5:00pm - 9:00pm).*

*I understand that **Texas, Ultimate!** does not provide accident and hospitalization insurance, and there is some inherent risk or danger in participating in Ultimate activities. I do not hold **Texas, Ultimate!** or **Austin ISD** liable for accident or injury resulting from participation in the Showcase Game at House Park on Friday, June 5<sup>th</sup>.*

*I give **Texas, Ultimate!** and Matt Lane Photography permission to use my child's image in it's promotional materials including, but not limited to, brochures, ads, and website. I understand my child's name will never be used in conjunction with their image.*

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Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

*I can practice on Friday, May 22 and/or Monday May 25th.    Shirt Size \_\_\_\_\_ Jersey # \_\_\_\_\_*

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Player Signature \_\_\_\_\_ Date \_\_\_\_\_