

**IDAHO USSSA ATHLETIC WAIVER/RELEASE OF LIABILITY
& TOURNAMENT ROSTER**

TEAM NAME _____

COACH/MANAGER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (HOME) _____

(WORK) _____

CO-MANAGER NAME _____

PHONE _____

READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the United States Specialty Sports Association and the IDAHO USSSA athletic/sports programs, related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in the program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist; and
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS USSSA NATIONAL AND STATE PROGRAMS, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("RELEASES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASES OR OTHERWISE.

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.

TYPE OR PRINT NAME	PLAYER SIGNATURE	BIRTHDATE	STATE OFFICE USE ONLY
1.	I HAVE READ THIS RELEASE		
2.	I HAVE READ THIS RELEASE		
3.	I HAVE READ THIS RELEASE		
4.	I HAVE READ THIS RELEASE		
5.	I HAVE READ THIS RELEASE		
6.	I HAVE READ THIS RELEASE		
7.	I HAVE READ THIS RELEASE		
8.	I HAVE READ THIS RELEASE		
9.	I HAVE READ THIS RELEASE		
10.	I HAVE READ THIS RELEASE		
11.	I HAVE READ THIS RELEASE		
12.	I HAVE READ THIS RELEASE		
13.	I HAVE READ THIS RELEASE		
14.	I HAVE READ THIS RELEASE		
15.	I HAVE READ THIS RELEASE		
16.	I HAVE READ THIS RELEASE		
17.	I HAVE READ THIS RELEASE		
18.	I HAVE READ THIS RELEASE		
19.	I HAVE READ THIS RELEASE		
20.	I HAVE READ THIS RELEASE		

SIGNATURE OF STATE/AREA DIRECTOR _____ DATE _____