NM USSSA – ABQ	NM USSSA WAVIER FO	DRM	Participant Information	(Adult)	Print Form	
First Name:	M.I.	Last name:			<b>(18 Years of Age or Older)</b> Gender:	
DOB:	Function (Select One):		Emergency Numb			
(MM/DD/YYYY)	_		Event Information			
			Livent injornation			
Event Host: ABQ NM US Activit(ies)/Sport: Soft	SSSA (Trinaca Investment Corpo ball - 2016		Team Name:ther activities held at or in conjunctio	n with the Event		
Name and Dates of Eve	nt (select all that apply):					
ABQ NM USSSA Slow	Pitch City of Albuquerque League	<b>2016</b> – SPRING	ABQ NM USSSA Slow Pitch City o	f Albuquerque League <b>2016</b> - SU	IMMER	
ABQ NM USSSA Slow	Pitch City of Albuquerque League	<b>2016</b> – FALL	NM USSSA Slow Pitch the Ramse	y Charitable Trust Inc. Tourname	ents <b>2016</b>	
TERMS A	ND CONDITIONS OF PA	ARTICIPATION	- READ CAREFULLY BEFORE	SIGNING		
ASSUMPTION OF Tournament/League/Eve dismemberment, and de risks may result from t Tournament/League/Eve there may be risks invo time or at the time of t muscle injuries and brok the condition of any pre (including, but not limit that I or my property m behalf of my heirs, exce below) of and from all participation in the Tour and all such Claims in and indemnity includes property damage, and le Parties" are New Mex parent, subsidiary, affili Ramsey Charitable Tru employees, agents, contre	ent/Activity, I may be engage ath, and that such participation he actions, negligence and fair ent/Activity and the Released Flived which are not known to me the Tournament/League/Event/Activity and the Released Flived which are not known to me the Tournament/League/Event/Activity facilities or equipment ed to, personal injury, disability ay suffer arising out of or in coutors, administrators and next liabilities, claims, actions, darmament/League/Event/Activity cluding, but not limited to, all any Claims based on the negliness by theft or otherwise, whet ico USSSA, ABQ NM USS lated or related companies inclust Incorporation's Tournamen ractors, sub-contractors, representations.	ASE AND INITIAL INTERPORT OF AND INITIAL INIT	DEMNITY: I understand that that involve the risk of serious per the risk of severe economic and properly facilities and others (including but not like condition of any property, facilities and Parties, and may not be foreseen to assume all of the foregoing risks, are by other participants or by the Rournament/League/Event/Activity, are and death), illness, damage, loss, class participation in the Tournament/League/Event/Activity are release, covenant not to sue, and fore penses of any nature ("Claims") are to indemnify and hold each of the lead disbursements up through and included in the condition of any of the Released Parties before, during or after such participation, the Tournament/League/Eventivity, its Board of Trustees, Directivity, its Board of Trustees, Directivity, its Board of Trustees, Directivity, and the league/Eventivity, its Board of Trustees, Directivity, its Board of Trustees, Directivity, its Board of Trustees of each of the league of	incidental to my part personal injury, illness, per operty loss and damage. I ur mited to other individuals in es or equipment used. I also no reasonably foreseeable to which risks may include, a eleased Parties, and the risk and accept personal responsibility, or expense, of ague/Event/Activity. On my ever discharge the Released ising out of or in any way a Released Parties harmless frouding any appeal. I understatives and covers bodily injury ipation. For the purposes here y Charitable Trust Inc., a ent/Activity host, the sponsectors, Supervisors; and the the foregoing entities.	ticipation in the rmanent disability inderstand that these in attendance at the so understand that by any of us at this mong other things of injury caused by oility for any injury any kind or nature, own behalf, and or Parties (as defined connected with my om and against any and that this released (including death) reof, the "Released and their respective ors For any and all officers, directors.	
Tournament/League/Eve otherwise. I agree that I any injury sustained or authorize any emergence my own behalf. Additio	ent/Activity, have the skill lev before I participate in the Tour illness or medical conditions y first aid, medication, medical mally, I authorize medical treat	rel required in cor mament/League/Ev experienced durin treatment or surg ment for me, at	nipunction with the Tournament/Leag yent/Activity, I will inspect all relate ag my attendance in connection wi ery deemed necessary by the attending my cost, if the need arises; how failure to provide, medical treatment	gue/Event/Activity, and have d facilities and equipment. I th the Tournament/League ng medical personnel if I am vever, I acknowledge that the	e not been advised in connection with e/Event/Activity, lanot able to act or	
			advise the Tournament/League/Ever nament/League/Event/Activity until a			
Released Parties the right voice, and appearance, it online webcasts, televisitimages or video, through of Tournament/League/It indemnify and hold harm	nt to photograph, record and/or in all media, whether now know on programming, motion pictur mout the universe in perpetuity, Event/Activity result, without co	videotape me and n or hereafter devi res, films, newspa whether for advert ompensation, resid	ent/Activity is photographed, recorde further to display, edit, use and/or o sed, (including, without limitation, in apers, and magazines) and in all for ising, publicity, or promotional purpo- ual obligations, reservation or limitati- ated with such grant and right to use	therwise exploit my name, far computer or other device a orms including, without limit oses, including, without limit ion, or further approval, and	ace, likeness, applications, ation, digitized ation, publication I agree to	
GOVERNING LAW: any legal action relating	This Waiver and Permission For g to or arising out of this Wair	ver and Permission	rned by the laws of the States of Flor n Form shall be commenced exclusi and all courts in New Mexico (or if s	ively in the Circuit Court of	the Ninth Judicia	

DATE SIGNATURE NAME

TO TRIAL BY JURY.

subject matter thereof, then to such other court sitting in such county and having subject matter jurisdiction), AND I SPECIFICALLY WAIVE THE RIGHT