CKTS/SOKY IGA Tennis Classic Release of Liability

I,, understand that eve	n under the safest conditions,
the activities involved with the game of tennis have inherent ri	sks involving possible injury,
disability, or even death. I further understand that the activity	may be physically, mentally,
and/or emotionally demanding. I verify that I am free of any m	edical, physical, or mental
conditions that may create undue risk(s) to me or others who r	may depend on me.
I certify that I am at least 18 years of age or have obtain	ained consent from my parent or
legal guardian, as indicated on the signature and date below.	
In consideration of being permitted to participate in th	is activity, I hereby authorize any
physician or hospital to provide such medical care as is requ	ired for the immediate diagnosis
and treatment of injury or illness sustained.	
Additionally, I, for myself, my heirs, successors and as	signs, hereby indemnify, release,
and hold harmless Chad Young (Tournament Director), Bowl	ing Green Parks and Recreation,
the Southern Kentucky Tennis Association, the Central Ken	tucky Tennis Series, employees,
volunteers, tournament sponsors, and others involved with its	planning and activities, from any
and all claims, demands, causes of action or damages which m	ay accrue on account of bodily or
personal injury, property damage or death suffered by myself	f, (my child), or any third parties,
including employees of Bowling Green Parks and Recreation	, and Tournament Director, staff
and volunteers, arising out of my participation in the tennis	tournament, including damages,
injury or death arising from the negligence of the aforesaid	d parties. I, or myself, my heirs,
successors and assigns, hereby assume any and all risks attend	ant to my participation in the IGA
Tennis Classic Tournament.	
Dated this the day of, 20 _	·
Signature of Participant	·
Signature of Parent/Guardian	
(required for participants under 18)	