CKTS Barren Classic Release of Liability

l,		, understand tha	at even under t	he safest cond	itions,
the activities involved v	with the game of t	ennis have inher	ent risks involv	ving possible in	jury,
disability, or even deatl	h. I further unders	tand that the ac	tivity may be p	hysically, ment	ally,
and/or emotionally der	manding. I verify t	hat I am free of a	any medical, ph	nysical, or ment	tal
conditions that may cre	eate undue risk(s)	to me or others	who may depe	end on me.	
I certify that I ar	m at least 18 years	s of age or have	obtained conse	ent from my pa	rent or
legal guardian, as indica	ated on the signat	ure and date be	ow.		
In consideration	of being permitte	ed to participate	in this activity,	, I hereby autho	orize any
physician or hospital to	provide such med	dical care as is re	quired for the	immediate dia	gnosis
and treatment of injury	or illness sustain	ed.			
Additionally, I, f	or myself, my heir	rs, successors an	d assigns, here	by indemnify, r	elease,
and hold harmless Trina	a Rickard (Tournar	ment Director), (Glasgow Parks	and Recreation	, Barren
County Schools, the Ce	ntral Kentucky Ter	nnis Series, emp	loyees, volunte	ers, tourname	nt
sponsors, and others in	volved with its pla	anning and activi	ties, from any	and all claims,	demands
causes of action or dam	nages which may a	accrue on accour	nt of bodily or p	personal injury,	property
damage or death suffer	red by myself, (my	\prime child), or any th	ird parties, inc	luding employe	es of the
above named facilities,	the sponsors, org	anizations, Tour	nament Directo	or, staff and vo	lunteers,
arising out of my partic	ipation in the tenr	nis tournament,	including dama	ages, injury or o	leath
arising from the neglige	ence of the afores	aid parties. I, or	myself, my heii	rs, successors a	nd
assigns, hereby assume	e any and all risks a	attendant to my	participation ir	n the Barren Cla	assic.
Dated this the	day of		_, 20		
Signature of Participant	t		•		
Signature of Parent/Gu	ardian				
(required for participan					