CKTS Danville Open Release of Liability

I,, understand that even under the safest
conditions, the activities involved with the game of tennis have inherent risks 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
medical, physical, or mental conditions that may create undue risk(s) to myself or others
who may depend on me.
I certify that I am at least 18 years of age or have obtained consent from my
parent or legal guardian, as indicated on the signature and date below.
In consideration of being permitted to participate in this activity, I hereby
authorize any physician or hospital to provide such medical care as is required for the
immediate diagnosis and treatment of injury or illness sustained.
Additionally, I, for myself, my heirs, successors and assigns, hereby indemnify,
release, and hold harmless Tao Costello (Tournament Director), Millennium Park, Boyle
County Schools, Danville Independent Schools, employees, volunteers, tournament
sponsors, and others involved with its planning and activities, from any and all claims,
demands, causes of action or damages which may accrue on account of bodily or
personal injury, property damage or death suffered by myself, (my child), or any third
parties, including employees of Millennium Park, Boyle County Schools, Danville
Independent Schools, 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 parties. I, or myself, my heirs, successors and assigns,
hereby assume any and all risks attendant to my participation in the Danville Open
Tennis Tournament.
Dated this the day of, 20
Signature of Participant

Signature of Parent/Guardian______.

(required for participants under 18)