



USA SUMMER GAMES

Individual Registration

www.utahsailing.com/summergames

Name _____

Address _____ Phone _____

City _____ State _____ Zip _____

Email _____

Gender _____ Date of Birth _____ Age _____

Amount of \$ _____ in the form of _____

which upon acceptance to Participate in the USA Summer Games athletics/sports program and related events and Activities.

Received By _____ On _____ (Date)

1. I agree that Prior to participating I will, or If I am the parent or guardian of a minor participant will instruct such participant that he or he should inspect the the facilities and equipment to be used and if I believe anything is unsafe I will immediately advise my coach (if I am participating as an athlete) or supervisor of such conditions(s) and refuse to participate.
2. I acknowledge and fully understand that I may be engaging in activities that involve risk of serious injury, permanent disability, or death, and severe social and economic losses which might result not only from my own actions, inactions or negligence by actions inactions or negligence of others, the rules of play, or the conditions of the premises or any of the equipment used, Further, that there may be other risks not known to us or reasonably foreseeable at this time.
3. I assume all the forgoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Intending to be legally bound I do hereby release, waive, discharge and covenant not to not to sue the USA Summer Games, Utah Sailing Association, sponsor for the USA Summer Games. Its affiliates their respective administrators, officers, directors, agents, coaches and other employees or volunteers of the organization, other participants, sponsoring agencies, sponsors advertisers and if applicable , owners and leasers or premises used to conduct the event, all of which are here in after referred to as "releases," from any and all liability to each of the undersigned, his or her heirs and the next of kin for any claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the release or otherwise in connection with association or entry in and/or arising out of my travel to, participation in and returning from competition of the games.

The USA Summer Games, their agents, employees or Sponsors shall not be responsible or liable for any and all damages injuries, losses, judgements, and/or claims whatsoever. Consumption of alcoholic beverages during the USA Summer Games is strictly forbidden. Participant further agree to allow the USA Summer Games, Sponsors and Advertisers permission to use their name, pictures quote video publishing world wide & WWW world wide web for world distributing and other information for publicity, advertising, or commercial purposes during and after the USA Summer Games.

I Agree to the above stated conditions and Rules _____ Date _____



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5. In the event that I sustain injury or illness while competing in the USA Summer Games, I hereby authorize any emergency first aid, medication, medical treatment, or surgery deemed necessary by licensed medical personnel, I also give my permission for attending medical personnel, to execute in my behalf my permission forms or other necessary medical documents and act in my behalf if I am not immediately able to do so.

6. I hereby consent to allow my picture and /or voice likeness to appear in any official documentary, promotional, exclusive television, radio or film coverage of the USA Summer Games and without compensation to me.

7. I understand that the USA Summer Games and not sell any of my personal information to third parties unless I give my consent and the USA Summer Games reserves the right to contact me about upcoming events or with other notices about the USA Summer Games.

The undersigned has read the above and release and understand that He/She has given up substantial rights by voluntarily signing this waiver

Signature _____ Date _____

Parent / Guardian

Signature _____ Date _____