

Player Name Company Name Street Address I pl City State Zip I ha und Phone home/work/cell Email Address Golf Shirt Size Age Telephone Telephone Physician Physician's Telephone Sig

Right in the Community

Player Commitment Agreement & Medical Information Waiver of Liability

Please read carefully and return to your Team Captain along with your check as soon as possible.

I want to participate in the **Tee Off for Community Challenge Golf Fundraiser.**

I agree to give my best effort to contact at least 40 friends and neighbors and business contacts to solicit donations to sponsor my event.

I further agree to sponsor myself with at least a \$150 donation and to start my pledge drive within one week of signing up. I understand the importance of this event to Right in the Community.

I plan to attend the Kick-off Party.

I have read the Medical Waiver and fully understand it.

I recognize that there is an element of risk in any outdoor sport or activity. I understand the risks and dangers involved in the RitC Golf Event and certify that I am fully capable of participating in this event.

I hereby assume all risks involved in playing in the RitC Golf Event and will hold Right in the Community, and the Dogwood Golf & Country Club, and its management company, employees and board members harmless from any and all liability, actions, causes of action, debts and claims resulting from the above-mentioned RitC Golf Event.

Signature	Date

Please complete and send in with your personal sponsorship fee. Mail to RitC. 1830 Water Place, Suite 120, Atlanta, Georgia 30339. For copies of forms and other support materials to help your fundraising, call your team captain or the RitC office at 770-427-8401.