I give my consent for	minor's name	born on	date of birth	to
play in the SWSA Open league. I agree to the terms of the WSSA release for my minor				
son/daughter, as stated below.				
ASSUMPTION AND ACKNOWLEDGMENT OF RISKS AND RELEASE OF LIABILITY AGREEMENT				
In consideration of being a Association, Inc., Its Affil the undersigned, acknowled	liates, leagues, and Mer	nber Teams, its related		
potential for perma	anent paralysis and dea	lved in this program is th, and while particular the risk of serious injury	rules, equipment	-
2. I KNOWINGLY A unknown, EVEN I	AND FREELY ASSUN	ME ALL SUCH RISKS. HE NEGLIGENCE OF	, both known and	
participation. If, he	owever, I observe any ι	d and customary terms inusual significant haza ttention of the nearest o	ard during my pre	sence
4. I, for myself and o HEREBY RELEA	on behalf of my heirs, as SE, INDEMNIFY, AN	ssigns, personal represe ID HOLD HARMLESS	ntatives and next THE United sta	of kin,
officials, agents an	nd/or employees, other	gues and Member Tean participants sponsoring	agencies, sponso	
		lessors of premises use Y AND ALL INJURY,		
		WHETHER ARISING I OR OTHERWISE, to th		ermitted
I HAVE READ THIS RE	-		· - · · · ·	
AGREEMENT, FULLY U GIVEN UP SUBSTANTI				
AND VOLUNTARILY WITHOUT ANY INDUCEMENT.				
Parent Signature		Date		