

NSSA TEXAS MEMBERSHIP FORM (2014 NATIONAL CHAMPIONSHIPS)

NSSA HOLD HARMLESS FORM. PLEASE READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the National Scholastic Surfing Association athletic sports program, related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE NATIONAL SCHOLASTIC SURFING ASSOCIATION, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

PARTICIPANT'S SIGNATURE: _____ **DATE** _____

PARTICIPANTS UNDER THE AGE OF 18 ARE REQUIRED TO HAVE PARENT SIGN: This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in the programs as provided above, even if arising from their negligence.

SIGNATURE OF PARENT OR GUARDIAN _____ **DATE** _____

PARTICIPANTS NAME _____ PHONE _____

ADDRESS _____ EMAIL _____

CITY _____ STATE _____ ZIP _____

BIRTHDATE / /

SCHOOL _____

TEXAS MEMBERSHIP FEE: \$90.00

MEMBERSHIP GOOD FOR 2014 NATIONAL CHAMPIONSHIP PARTICIPATION. ALL MEMBERSHIP EXPIRES ON JULY 4, 2014

**MAKE CHECK OUT TO NSSA. SEND TO:
NSSA, P.O. BOX 495
HUNTINGTON BEACH, CA 92648**

**Or:
NSSA
10031 DANA DRIVE
HUNTINGTON BEACH, CA 92646**