

# PLAY 60 CHALLENGE - LIABILITY WAIVER FORM

Each participant **must** complete the online registration prior to the Play 60 event.

Additionally, a parent or legal guardian must sign this liability waiver. This liability waiver form must be presented upon check-in, on the day of the event. Check-in will begin thirty minutes before the event begins at the Curtis D Menard Memorial Sports Center in Wasilla, AK. Please be sure and **pick up your child no later than event end time of 12:00 PM.** \*\*\*\*The Mat-Su Sea Hawks will not be responsible for any child left at the event\*\*\*\*

Participant's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell. Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Gender:  Male  Female School: \_\_\_\_\_

Is your child healthy?  Yes  No Do you have medical insurance?  Yes  No

## WAIVER OF LIABILITY

(READ CAREFULLY – BY SIGNING BELOW YOU ARE WAIVING ALL CLAIMS & ASSUMING ALL RISK)

**Participants Name** (please print): \_\_\_\_\_

As a participant in the NFL Play 60 Challenge on July 19, 2022 at Curtis D Menard Memorial Sports Center in Wasilla, AK, we understand that we assume all incidental risk and danger and by agreeing of our own free will to be participants, waive any claim against the Mat-Su Sea Hawks Booster Club, United Way of Mat-Su, Mat-Su Health Foundation, Curtis D Menard Memorial Sports Center, Central Mat-Su Volunteer Fire Department, Event Staff, Event sponsors, Event Volunteers, and the NFL. I acknowledge that I am responsible for any and all medical expenses due to the participant's illness or injury in connection with the Event. However, I grant permission to the Central Mat-Su Volunteer Fire Department to provide the participant with emergency medical treatment if needed.

I agree that organizations may use photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

\_\_\_\_\_  
**Name of Participant's Parent or Legal Guardian (Please Print)**

\_\_\_\_\_  
**Signature of Participant's Parent or Legal Guardian**

\_\_\_\_\_  
**Date**