

Team Name: _

INTERNATIONAL TRADITIONAL GAMES SOCIETY

Gathering of Families Registration Form Youth Handgame Tournament May 20, 2022



Orga	anization/School:			
Primary Contact/Coach:				
Prim	nary Contact phone number:			
	nil(s) for notifications:			
	ling Address:			
City:		State:	Zip Code:	
Orga	anization/School Mailing Address	(if they are paying re	egistration fee):	
City	:	State:	Zip Code:	
	Player Name	DOB	Contact	Tribal Affiliation
			Phone/Email	
1				
2				
3				
4				
5				
6				

Please make checks Payable To:

International Traditional Games Society PO Box 535 Great Falls, MT 59403

- **Schools may submit a purchase order with this registration form.
- **To pay with a credit card, contact Kati at admin@traditionalnativegames.org.
- **Registration must be accompanied by Release Form (see page 2)

Questions?

Call: 406-952-0150 or email: games@traditionalnativegames.org

^{*}All youth events require proof of each youth's DOB at time of registration. Eligible ages: 8 years & up.

Release Form

In consideration of being allowed to participate in any way in the International Traditional Games Society clinic, related events, and activities, the undersigned acknowledge, appreciate and agree 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 releases or others, and assume all 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 representative and next of kin, hereby release and hold harmless the International Traditional Games Society, its officers, officials, agents and/or employees, and other participants, sponsoring agencies, sponsors, advertiser, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), with respect to any and all injury.
- 5. I give my permission for the free use of my name and/or pictures for use in broadcasts, telecasts, newspapers, etc., for the promotion and information purposes of the event organizers.

I have read this Release of Liability and Assumption of Risk Agreement, fully understand that I have given up substantial rights by signing it. I sign freely and voluntarily without any inducement.

Date:	
Participant Name:	Age
Participant Signature:	
Parent/Guardian Name:	
Parent/Guardian Signature:	
Relationship to participant (if minor)	