



INTERNATIONAL TRADITIONAL GAMES SOCIETY
Gathering of Families Registration Form
HS Boys Double Ball Tournament
 May 20, 2022



Team Name: _____
 Organization/School: _____
 Primary Contact/Coach: _____
 Primary Contact phone number: _____
 Email(s) for notifications: _____
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 Organization/School Mailing Address (if they are paying registration fee):

 City: _____ State: _____ Zip Code: _____

	Player Name	DOB	Contact Phone/Email	Tribal Affiliation
1				
2				
3				
4				
5				
6				

***All youth events require proof of each youth's DOB at time of registration. Eligible ages: 14-17 years.**

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

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) _____