

INTERNATIONAL TRADITIONAL GAMES SOCIETY

Gathering of Families Registration Form High School Handgame Tournament August 27, 2021



Organization/School:			
Primary Contact/Coach:			
Primary Contact phone number:			
Email(s) for notifications:			
Mailing Address:			
City:	State:	Zip Code:	
Organization/School Mailing Addre	ess (if they are paying reg	gistration 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 of the second of t	s & Clark Interpretive Ce	C	
I would like transportation to First I throwing competition. <i>Circle one</i> .	-		
Please make checks Payable To: International Traditional Games So PO Box 535 Great Falls, MT 59403	ciety		
**Schools may submit a purchase of **To pay with a credit card, conta **Registration must be accompanie	act Kati at <u>admin@tradit</u>	ionalnativegames.org.	
Questions? Call: 406-952-0150 or email: games	s@traditionalnativegame	es.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)	