

CMTC Girls Summer League 2011

Player Name: _____

Permission & Waiver of Liability & Authorization for Emergency Care

I hereby give my consent for the above named person to participate in the 2011 CMTC Summer League. I also agree to reimburse the CMTC Youth Fellowship or Flick Park for equipment used should it become lost or damaged. I understand that neither the CMTC Youth Fellowship nor Flick Park will be held responsible for personal items lost or stolen.

I authorize the staff of the Summer League or the authorized personnel of Flick Park to select and secure medical attention as may be necessary for the above named person as a result of injuries or other events requiring emergency care while I/we are not in attendance at such event.

I hereby release the CMTC Youth Fellowship and Flick Park from any and all liability on account of such selection or authorization for any and all damages which occur on account thereof.

Player Signature _____

Contact Phone _____ - _____

Guardian Signature _____
(if player is under the age of 18)