

# The ROC and ROLL Festival 2015

Dates: Nov. 13-15, 2015

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Phone: \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_

AHC#: \_\_\_\_\_

## Waiver and Assumption of Risk Agreement

I, \_\_\_\_\_, hereby acknowledge that participation in the athletic events and planned activities of Rebel Amateur Wrestling Club might result in personal injury, property damage and/or loss. I fully understand these risks and hereby agree to participate in this wrestling training event voluntarily and at my own risk.

I agree that Rebel Amateur Wrestling Club, and any of their servants, agents, sponsors, volunteers or employees will not be held responsible for any accidents or loss however caused and agree to release that same from all claims or damages that may arise as a result of or by any reason of such accidents or loss.

\_\_\_\_\_

**Participant Name (Please Print)**

\_\_\_\_\_

**Parental Signature (if participant under 18)**

\_\_\_\_\_

**Date**