

Personal Waiver for Trident Wounded Warrior Sporting Clay Benefit

Name

Address

City

Zip

Home phone

Work phone

E-mail

I, _____, do hereby agree that I will indemnify and hold harmless Hope For The WarriorsTM, Team Trident, Rio Brazos Hunting Preserve, the tournament officials and the other supporters listed in the Tournament Program from any and all liability or claims of injury of whatsoever nature which may be incurred by me as a result of my voluntary participation in the Trident Wounded Warrior Sporting Clay Benefit on May 30th, 2009.

I further represent and certify that I am physically able to participate in this event without limitation, and that I have no disabilities which might prevent me from doing the same.

I certify that either I am eighteen (18) years of age or older, or that my parent or court-appointed guardian has full knowledge of my participation in this event and has given me permission to participate, as evidenced by his/her signature below.

PARTICIPANT (If not age 18 or older, parent/guardian must co-sign below)

Participant Signature

Date

PARENT/GUARDIAN (Undersigned has read the above and understands this waiver)

Parent/Guardian Signature

Date