# COMPETITION WAIVER FORM

**BOWLS SASKATCHEWAN INC.**

I, , do hereby, for and on behalf of myself, my heirs,

executors, and assigns, remise, release and forever discharge Bowls Saskatchewan Inc., its officers, members, representatives and agents, and their heirs, executors, administrators, successors, and assigns, of and from any and all manner of actions, causes of action, claims and demands of every kind, nature and character which I may have, now have or can, shall or may hereafter have, or which may be suffered or sustained by me in connection with my participation in tournament, playdown and Bowls Sask events and my association herewith, including my travelling to and returning from said event, and all such actions, causes of action, claims and demands are hereby waived.

Competitor Name:

Name of Specific Tournament, Playdown or Bowls Sask Events:

Mailing Address:

City: Province: Postal Code:

Age: E-Mail:

Fax:

Tel: (h) (w)

***I agree to accept and be bound by the terms of this agreement as a condition of attendance at the applicable Bowls Sask event, tournament, and playdown.***

Witness Signature: Name of Witness:

Date:

Signature: