# U18 YOUTH RELEASE FORM

## BOWLS SASKATCHEWAN INC.

**Name:** (print child name)

**If under 18 years of age, release form must be completed and signed by the team member’s parent or legal guardian**

I, the undersigned, as parent/legal guardian of the above referenced lawn bowls competitor, have reviewed this release with my child and believe that my child understands what is required of him/her by this release. I expressly agree the Bowls Saskatchewan Inc., its officers, members, representatives and agents, and their heirs, executors, administrators, successors, and assigns, shall not under any circumstances be under any liability to my child or me for any loss, damage or injury of any kind arising directly or indirectly from any act, neglect or fault (whether negligent or otherwise) on the part of Bowls Saskatchewan Inc. and connected with my child’s participation in tournament, playdown and Bowls Sask events or any disciplinary action taken against my child by Bowls Saskatchewan Inc. I agree to indemnify Bowls Saskatchewan Inc., its officers, members, representatives and agents, and their heirs, executors, administrators, successors, and assigns, from and against all actions, suits, causes of action, proceedings, claims, demands, costs and expenses whatsoever which may be taken or made against Bowls Saskatchewan Inc. or incurred by Bowls Saskatchewan Inc. in conjunction with, or arising out of any such loss, damage or injury.

I give my consent, in the first instance, Umpire/Officials, and, if unavailable, to Bowls Saskatchewan Inc., to make decisions concerning my child’s medical care and treatment, and where necessary to authorize such treatment, in emergency situations and where every reasonable effort, in the circumstance, has been made to contact me regarding my child’s medical status.

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

Witness Signature: Name of Witness:

Date:

Signature of Parent/Guardian:

Parent/Legal Guardian name:

Address: Province: Postal Code: E-mail: Fax:

Tel: (h) (w)

Additional contact information from above: