

LIABILITY WAIVER

PARTICIPANTS IN LABOR-FEST ACTIVITIES RECOGNIZE AND AGREE THAT LABOR-FEST INC., AND THEIR DIRECTORS, OFFICERS, AND ADMINISTRATORS, WILL NOT BE LIABLE FOR ANY EXPENSES, COSTS, DAMAGES, OR ANY OTHER CLAIMS, MONETARY OR OTHERWISE, WHICH ARE CAUSED BY OR IN ANY WAY RELATED TO THE ACTIONS OF LABOR-FEST PARTICIPANTS WHILE PARTICIPATING IN ANY LABOR-FEST ACTIVITIES. PARTICIPANTS IN LABOR-FEST ACTIVITIES AGREES TO INDEMNIFY LABOR-FEST INC., AND THEIR AGENTS, DIRECTORS, OFFICERS, AND ADMINISTRATORS, FOR ANY EXPENSES, COSTS, DAMAGES, JUDGEMENTS, VERDICTS OR AWARDS, OF ANY OTHER CLAIMS OR LEGAL ACTIONS WHICH IN ANY WAY RELATES TO THE ACTIONS OF LABOR-FEST INC., WHILE PARTICIPATING IN LABOR-FEST ACTIVITIES.

DATE SIGNED AND WITNESSED BY: _____

TEAM NAME/SPONSOR _____

EVENT: TEEN CO-ED MUD VOLLEYBALL

PARTICIPANT SIGNATURE	PARENT/GUARDIAN SIGNATURE	EMERGENCY CONTACT. PHONE NUMBER
<u>1.</u>		
<u>2.</u>		
<u>3.</u>		
<u>4.</u>		
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<u>14.</u>		

THIS WAIVER IS FOR YOUR PROTECTION AS WELL AS FOR OURS. PLEASE HAVE EACH PERSON SIGN AS WELL AS THE PARENTS. THIS IS A MUST OR YOUR TEAM WILL NOT PARTICIPATE IN THIS TOURNAMENT.

WHEN YOU RECEIVE YOUR CONFIRMATION NUMBER PLEASE PUT IT IN THE SPACE BELOW.

CONFIRMATION #