Waiver of Liability, Assumption of Risk, and Emergency Contact

In consideration of being allowed to participate in any way in the Benton Brigade Hurlin and/or activities, I,, that:	
1. The risk of serious injury from the activities involved in any and/or all Benton significant, including the potential for permanent paralysis and death, and while particular discipline may reduce this risk, the risk of serious injury does exist; AND	•
2. I knowingly and freely assume all such risks, both known and unknown, and a participation; AND	assume full responsibility for my
3. I willingly agree to comply with the rules and policies and customary terms as however, I observe any unusual significant hazard during my presence or participation, and bring such to the attention of the nearest official immediately; AND	• • • • • • • • • • • • • • • • • • • •
4. I, for myself and on behalf of my heirs, assigns, personal representatives and and hold Benton Brigade Hurling Club, and its officers, officials, agents and/or employed agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used ("Releases") harmless with respect to any and all injury, disability, death, or loss or damextent permitted by law.	es, other sport participants, sponsoring to conduct the event or activity
Furthermore, I understand, agree and acknowledge that some activities may be of a haz and/or strenuous activity. Understanding this, I state that I have no medical condition of safe and active participation in any Benton Brigade Hurling Club activity. In addition, I use Hurling Club does not provide medical insurance coverage for activity participants and to must be provided individually by such participants. In the case of injury or medical emet their parent or guardian, does not respond at the time of the emergency, the Benton Briseek, administer, or have administered whatever first aid or emergency medical care dewelfare, and it is understood that participant, and NOT the Benton Brigade Hurling Club employees, other sport participants, sponsoring agencies, sponsors, advertisers, or, if a used to conduct the event or activity, shall be responsible for any and all charges for such whether participant's medical insurance would cover such charges.	or impairment that might inhibit my inderstand that the Benton Brigade that any applicable medical insurance regency and in the event participant, or rigade Hurling Club has permission to be emed necessary for participant's or or its officers, officials, agents, or pplicable, owners or lessors of premises
I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULUNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN WITHOUT ANY INDUCEMENT.	
, on this date,, on this date,	
(Emergency Contact Name) (Emergency Contact Phone Number)	