

Team Waiver

I hereby understand that those individuals on this form and myself as a parent or guardian acknowledge that each program, like all physical activities, present some inherent risk of injury. Furthermore, I acknowledge that the City of Platteville, the Platteville School District, the National Guard Armory, and other organizations, which allow use of facilities, do not provide hospital/medical insurance for the duration of the program. Therefore, I hereby release these organizations and their employees of any financial responsibility due to injuries received during program participation.

Photo/Talent Release: I hereby irrevocable release, consent and allow the City of Platteville Parks and Recreation ant its agents to use my photograph/likeness/voice, as it pertains to my participation with the City of Platteville, in any manner for promotional efforts without expectation of any reimbursement in connection with this use.

<u>Name</u>	<u>Signature</u>
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