



KHOPE International
 Kids Hope Over Poverty
 www.khopeinternational.org



american canyon
FAMILY
 resource center
 Supporting our community.

3rd Annual KHOPE CLASSIC SOFTBALL TOURNAMENT

Sunday, April 25, 2010

Shenandoah Park - American Canyon, California

Registration Form

Name: _____

Address: _____

City, State, Zip: _____

Phone _____ Email: _____

_____ I would prefer to play on the same team as : _____

_____ I would prefer to play _____ (indicate positions)

_____ I would like to volunteer to assist with the event

Indicate your playing ability _____ Beginning _____ Intermediate _____ Advanced

Early Registration for returning players \$10 – all forms & fees must be received by March 10th

March 11th Open Registration goes to \$15 – all forms & fees must be received by April 18th

Make all checks payable to: KHOPE International

Mail all forms and fees to:

KHOPE International
 Attn.: Softball Tournament Registration
 438 Northrup Lane
 American Canyon, CA 94503

For more information call **Nancy Nabrynski** at 707-318-4860

Note: All players must be 18 years old or over and sign a liability waiver.

Participant's name (please print): _____

3rd Annual KHOPE CLASSIC SOFTBALL TOURNAMENT

Waiver of Liability and Assumption of Risk

Waiver: In consideration of being permitted to participate in any way in the **3rd Annual KHOPE CLASSIC SOFTBALL TOURNAMENT** on April 25, 2010, **I**, for myself, my heirs, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue** KHOPE International and its board of directors or officers, The American Canyon Family Resource Center and its board of directors or officers, the tournament volunteers, sponsors and exhibitors **from any and all claims including the negligence of tournament organizers, sponsoring organizations or volunteers** resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in the tournament or related activities or use of equipment and facilities provided as required for the activity.

Signature of Participant

Date

Assumption of Risks: Physical activity, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. KHOPE International, a 501(c)3 public charity, is sponsoring the **3rd Annual KHOPE CLASSIC SOFTBALL TOURNAMENT** ("the activity") for the purpose of raising money for the benefit of its programs and The American Family Resource Center. Participation in the activity may involve strenuous exertions of strength using various muscle groups, quick movements involving speed and change of direction, and sustained physical activity that places stress on the cardiovascular system.

The specific risks range from 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks and concussions 3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in participating in the 3rd Annual KHOPE CLASSIC SOFTBALL TOURNAMENT. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Acknowledgement of Understanding: I have read this waiver of liability, and assumption of risk, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

Signature of Participant

Date