

# Waiver for Event Participation

## North Texas Orienteering Association

P.O. Box 2291 Allen, TX 75013



All participants (individual competitors and each member of a group) must submit a completed waiver. Those without a completed waiver will not be permitted to participate in the event.

Complete this waiver and bring it with you to the event. At the registration table, you will turn in this waiver, pay your entry fee, and receive your punch card. Maps and clue sheets are distributed at the start line.

Please complete the following in **pen**.

**Name:** \_\_\_\_\_ **Club:** \_\_\_\_\_  
**NTOA Member?** Yes  No   
(NTOA, Other O-club, School/JROTC, Scouts, etc.)

**Course:** \_\_\_\_\_ **Sex: (M/F)** \_\_\_\_\_ **Year of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_  
(optional – to receive last-minute event updates or news, will not be shared outside NTOA.)

To help us ensure that everyone is accounted for after the meet, please provide the following information:

**Person responsible for your group:** \_\_\_\_\_

**Vehicle – Make/Model:** \_\_\_\_\_ **Color:** \_\_\_\_\_ **Plate #:** \_\_\_\_\_

To be filled in by Registrar:

Event: \_\_\_\_\_ Date: \_\_\_\_\_ Meet Fees: \_\_\_\_\_ Membership: \_\_\_\_\_ Compass: DL or \$10

## **Waiver of Responsibility**

If you do not fully accept the following and do not sign this waiver, you will not be allowed to participate. I, the undersigned, know that Orienteering, as an outdoor action sport, carries significant risk of personal injury. I know that there are natural and man-made hazards, environmental conditions, and risks, which in combination with my actions, can cause me serious or possibly even fatal injury. I agree that I as a participant must take an active role in understanding and accepting these risks, conditions and hazards. I also agree that I alone am responsible for my safety while I participate in this event, and not the organizers and officials of this event, the North Texas Orienteering Association, the US Orienteering Federation, the land owners or managers, the municipality/county/state of the event location, or any sponsors. Finally, the undersigned is granted a one-time guest membership to OUSA only for the duration of the event.

**Parent or Guardian MUST sign if entrant is under 18 years of age. All participants, including all group members, must have a valid waiver.**

---

**NAME (Please Print)**

---

**SIGNATURE (or signature of parent/guardian)**

---

**DATE**