

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 Registration, you will turn in this waiver, pay your entry fee, and receive a punch card. Retrieve e-punch if renting one at the e-punch station. Maps and clue sheets are distributed at the start line.

Please complete the follow	ving in pen .			
Name:			Club: (NTOA, Other O-club, School, Scouts, etc.)	
NTOA Member? Yes	_ No		(NTOA, Other O-club, School, Scouts, etc.)	
Course:	Sex: (M/F)	_Year of Birth: _		
Address:				
City:	States	:Zip:	Phone:	
unsubscribe at any time vi	ia link in email.) ryone is accounted f	for after the meet,	– data will not be shared outside NTOA – please provide the following information	
			Plate #:	
	Waiver	of Respons	sibility	
I, the undersigned, know to injury. I know that there a combination with my action participant must take an adalso agree that I alone am and officials of this event,	that Orienteering, as re natural and man-rons, can cause me sective role in understaresponsible for my state North Texas Or ality/county/state of	an outdoor action made hazards, enverious or possibly of anding and acceptionsafety while I parti- rienteering Association, the event location,	ever, you will not be allowed to participate a sport, carries significant risk of personal vironmental conditions, and risks, which i even fatal injury. I agree that I as a sing these risks, conditions and hazards. I ticipate in this event, and not the organize ation, Orienteering USA, the land owners a, or any sponsors. Finally, the undersigned duration of the event.	n
Parent or Guardian including all group n	_		r 18 years of age. All participant aiver.	5,
NAME (Please print)				
SIGNATURE (or signature)	ure of parent/guard	lian	DATE	