

Registration for KTHC Ringer Classic 2019

Elders Horseshoe Tournament



Name: _____

Phone Number: _____

Teammate: _____

Team Name: _____

WAIVER AND RELEASE

In consideration of my registration being accepted, I, intending to be legally bound, do hereby, for myself, my heirs, executors, and administrators, waive, release, and forever discharge the Kickapoo Tribe of Oklahoma, and its respective officers, agents, and/or representatives; for any and all damages, injuries, or accidents which may be sustained or suffered in conjunction with my association with or participations in and/or arising from the traveling to or returning from the KTHC Ringer Classic location. By signing below I have fully read and understand my rights, and also to the best of my knowledge, am able to participate in this event.

I hereby grant and authorize the Kickapoo Tribal Health Center the right to take, edit, alter, copy, exhibit, publish, distribute and make use of any and all pictures or videos taken to be used in and/or for legally promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, websites, social media/networking sites and other print and digital communications, without payment or any other consideration. This authorization extends to all languages, media, formats and markets now known or hereafter devised. This authorization shall continue indefinitely, unless I otherwise revoke said authorization in writing. The Kickapoo Tribal Health Center will refrain from posting said photos in a negative or derogatory manner.

I understand and agree that the materials shall become the property of the Kickapoo Tribal Health Center and will not be returned.

Signature

Date