

Paddles for a Purpose Tournament Waiver

I acknowledge that this athletic event is a test of a person’s physical limits and carries potential for serious injury and property loss. The risks include, but are not limited to: actions of other people including, but not limited to, participants, volunteers, spectators, event monitors and/or producers of the event; lack of hydration, weather, and/or other natural conditions. I hereby assume all of the risks of participating in this event.

I hereby certify that I am physically fit, have sufficiently trained for participation in this event and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by the Baldwin County District Attorney’s Office Foundation and the sponsors of the event in which I may participate and it will govern my actions and responsibilities at aid event.

I understand that at this event that I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, sponsors, organizers, and/or assigns.

This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under the applicable law.

I hereby certify that I have read this document and I understand its content.

Print Name: _____

Signature: _____ Date: _____