



**THE DUST BOWL
Waiver and Release of Liability Form**

I, the undersigned, acknowledge that I am 18 years or older in age and have the capacity to legally enter into a contact, or have obtained the signature of my parent or legal guardian. In exchange for the right to participate in the Light of Chance, Inc. Dust Bowl Basketball Tournament.

I hereby release and discharge Light of Chance, Inc and it’s officials, representatives, employees, and volunteers acting in their capacity within the Dust Bowl Basketball Tournament and any and all sponsors of Light of Chance, Inc. of/ from **ANY AND ALL LIABILITY, CLAIMS, DEMANDS, CAUSE OF ACTION, LOSS, DAMAGE, OR INJURY** to person or property, including serious injury and/or death which may result while preparing for or participating in the above event.

I recognize that participating in the Light of Chance, Inc. Dust Bowl Basketball Tournament is a physically demanding and inherently dangerous activity. I am aware of the risk of injury from participating in these events and I hereby voluntarily elect to participate in the activities related to these events.

It is the intent of the parties for this release to be binding upon the heirs(s), next of kin, executor(s), distribute(s), and administrator(s) of the undersigned.

I have read the waiver and release of liability and understand that it is a full and complete unconditional release from the waiver of liability for **ANY and ALL** injuries I may suffer. I freely and willingly sign this document.

Signature of Participant

Date

Printed Full Name of Participant