

## WAIVER FORMS

In recognition of the acceptance of my entry, I, intending to be legally bound do hereby, for myself, my heirs, my executors and administrators discharge any and all rights, claims, which may be or which hereafter accrue to me against the Serafini Memorial Softball Tournament, The Serafini Community Fund, its Board of Directors and all assisting organizations and individuals from all damages, demands, actions, injury or death reached during participation in the Serafini Memorial Softball Tournament on Saturday, August 15, 2009 or any raindate. I hereby grant full permission to photograph, videotape, or any other record of this event for any purpose whatever. I shall abide by all decisions of the tournament officials. I certify that I am physically fit for this tournament.

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGN NAME

\_\_\_\_\_  
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