



## 2021 CENTRAL REGION CHAMPIONSHIPS ENTRY FORM INFORMATION

Saturday, June 19 and Sunday, June 20, 2021

Location: Stride Bank Center, 301 S. Independence St., Enid, OK 73701

Doors open at 7:30 a.m. Competition begins at 8:00 a.m.

### SCHEDULE OF EVENTS:

**FRIDAY, JUNE 18, 2021** (Starting at 4 p.m.)

- \* PreTrials music tests and open paid practice

**SATURDAY, JUNE 19, 2021** (Starting at 8 a.m.)

- \* PreTrials Compulsories, Freestyle, Pairs and Team Competition
- \* Open and Regional Strut  
Open and Regional 2-Baton
- \* Open and Regional Artistic Twirl and Artistic Twirl Pairs  
Open and Regional 3-Baton

**SUNDAY, JUNE 20, 2021:**

- \* Groups
- \* Foundation Events
- \* Open and Regional Solo and Duets

### FOR MAIL ENTRIES (Must be postmarked by May 1, 2021):

Koralea Slagle

P.O. Box 133

Clay Center, KS 67432

Phone: 785-632-1417 E-mail: [centralregionusta@gmail.com](mailto:centralregionusta@gmail.com)

**ONLINE ENTRIES ONLY:** Please submit payment via PayPal. To do this:

- 1) Go to <http://paypal.com> and Sign Up or Sign In
- 2) Click on the tab that says Send Money on the top of the screen
- 3) Choose "send money" to [centralregionusta@gmail.com](mailto:centralregionusta@gmail.com)
- 4) Choose "SENDING TO A FRIEND" so that Central Region does not get charged a fee
- 5) In the notes section include the athlete's name
- 6) Send to for total entry amount, click Personal - Payment Owed and Submit
- 7) Email this completed entry form to: [centralregionusta@gmail.com](mailto:centralregionusta@gmail.com)

**The Central Regional Championships will be conducted by USTA Rules.  
USTA Rule Book, visit [www.ustwirling.com](http://www.ustwirling.com).**

**Entry Deadline: submitted or postmarked on or before **May 1, 2021**.**

**ENTRIES RECEIVED AFTER THE DEADLINE WILL NOT BE ACCEPTED. NO REFUNDS.**



# 2021 CENTRAL REGION CHAMPIONSHIPS

## INDIVIDUAL ENTRY FORM

Athlete Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-mail (for confirmation): \_\_\_\_\_

Age (8/31/2021): \_\_\_\_\_ Birthdate (MM/DD/YY): \_\_\_\_\_ Phone: \_\_\_\_\_

Coach's Name (to receive email critiques): \_\_\_\_\_

Coach's Email: \_\_\_\_\_

For judging purposes, list all other instructors in the last 6 months: \_\_\_\_\_

USTA #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ If no USTA # or expired, buy Non-Member

Pairs Partner: \_\_\_\_\_ Partner's Birth Date: \_\_\_\_\_ Partner's USTA#: \_\_\_\_\_

**Entry Deadline: Submitted or postmarked on or before May 1, 2021.**

**SATURDAY EVENTS:** Strut, 2-Baton, Artistic Twirl, Artistic Twirl Pairs, 3-Baton

**SUNDAY EVENTS:** Groups, Rating Events, Foundation Events, Solos, Duets

**OPEN CONTEST EVENTS:**

|                       |                                      |                                   |                               |                               |                               |                               |
|-----------------------|--------------------------------------|-----------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| SOLO:                 | (\$15 each)                          | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| STRUT:                | (\$15 each)                          | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| ARTISTIC TWIRL:       | (\$15 each)                          | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| 2-BATON:              | (\$15 each)                          | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| 3-BATON:              | (\$15 each)                          | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| COLLEGIATE EVENT:     | (\$25 each) <input type="checkbox"/> |                                   |                               |                               |                               |                               |
| DUET                  | (\$30 pair)                          | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| ARTISTIC TWIRL PAIRS: | (\$30 pair)                          | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |

(One partner submits entry for both for all Pair/Duet Events) Open Contest Events Total: \$ \_\_\_\_\_

**REGIONAL CHAMPIONSHIP EVENTS:**

*Athletes of all levels may enter State Championship events for an opportunity to become an age, semi-final, or finals champion.*

|                 |             |                          |                       |             |                          |
|-----------------|-------------|--------------------------|-----------------------|-------------|--------------------------|
| WOMENS' SOLO:   | (\$25 each) | <input type="checkbox"/> | ARTISTIC TWIRL PAIRS: | (\$50 pair) | <input type="checkbox"/> |
| MENS' SOLO:     | (\$25 each) | <input type="checkbox"/> | 2-BATON:              | (\$25 each) | <input type="checkbox"/> |
| STRUT:          | (\$25 each) | <input type="checkbox"/> | 3-BATON:              | (\$25 each) | <input type="checkbox"/> |
| ARTISTIC TWIRL: | (\$25 each) | <input type="checkbox"/> |                       |             |                          |
| DUET            | (\$50 pair) | <input type="checkbox"/> |                       |             |                          |

(One pairs partner submits entry for both) Regional Championship Events Total: \$ \_\_\_\_\_

**RATING EVENTS: (SUNDAY)**

COSTUME MODELING\* (\$10 each)

Rating Events Total: \$ \_\_\_\_\_

**FOUNDATION EVENTS: (SUNDAY)**

|   |             |                                   |                               |                               |                               |                               |
|---|-------------|-----------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| BASIC STRUT:  | (\$10 each) | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| <i>Marching in rhythm in a square, with marching steps in the 1-2, or left right pattern, throughout the 32 counts.</i>     |             |                                   |                               |                               |                               |                               |
| PARADE MARCH:   | (\$10 each) | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| <i>Basic strut while twirling the baton in any mode and pattern (full hand twirls, rolls, passes, releases or fingers).</i> |             |                                   |                               |                               |                               |                               |
| MILITARY STRUT:   | (\$10 each) | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| <i>Marching in rhythm in a retraced "L" formation.</i>  |             |                                   |                               |                               |                               |                               |
| PRESENTATION:   | (\$10 each) | Rating*: <input type="checkbox"/> | Nov: <input type="checkbox"/> | Beg: <input type="checkbox"/> | Int: <input type="checkbox"/> | Adv: <input type="checkbox"/> |
| <i>Body moves and baton twirling blended, a portion of the Championship Event of Strut</i>                                  |             |                                   |                               |                               |                               |                               |

Foundation Total: \$ \_\_\_\_\_

**CAS EVALUATION EVENTS: (SUNDAY)** *The Competitive Achievement System (CAS) is a progressive skill development system,*

**organized LEVEL of the Athletes in the "L:" box below.** *For official evaluation, athlete must present CAS Record Book at contest; otherwise, only comments will be provided.*

|                |             |                                 |                             |
|----------------|-------------|---------------------------------|-----------------------------|
| COMPULSORIES:  | (\$10 each) | Eval.: <input type="checkbox"/> | L: <input type="checkbox"/> |
| MOVEMENT TECH: | (\$10 each) | Eval.: <input type="checkbox"/> | L: <input type="checkbox"/> |
| SHORT PROGRAM: | (\$10 each) | Eval.: <input type="checkbox"/> |                             |

CAS Evaluation Total: \$ \_\_\_\_\_

**REGIONAL CHAMPIONSHIP T-SHIRT:** (\$20 each) T-shirts must be ordered in advance. Pick up at the contest.  
 Please use the dropdown box to select number of t-shirts in each size.

T-SHIRTS

|           |   |
|-----------|---|
| CHILD SM  | □ |
| CHILD MED | □ |
| CHILD LG  | □ |
| ADULT SM  | □ |
| ADULT MED | □ |
| ADULT LG  | □ |
| ADULT XL  | □ |
| ADULT XXL | □ |
| TOTAL:    | □ |

T-Shirt Total: \$

Special comments to contest director: \_\_\_\_\_

|  |  |
|--|--|
| <p><b>REGISTRATION FEE (Select one):</b></p> <p>Individual (\$10) <input type="checkbox"/></p> <p>Family (\$15) <input type="checkbox"/></p> <p><b>NUMBER OF PROGRAM BOOKS (\$5 each)</b> <input style="width: 30px;" type="text" value="0"/></p> <p>* Events not sanctioned by USTA</p> | <p>REGIONAL ENTRY FEES: \$</p> <p>OPEN ENTRY FEES: \$</p> <p>Registration Fee (Reqd. once per family): \$</p> <p><input type="checkbox"/> er Fee (\$5 per athlete): \$</p> <p>Pre-ordered Programs: \$</p> <p>T-Shirt: \$</p> <p><b>TOTAL DUE: \$</b> <input style="width: 100px;" type="text"/></p> |
|--|--|

**Waiver of Liability:** I agree to assume the risk that may occur to me or my child as a result of participating in the contest. I will not hold USTA or any of its officials liable. As Parent/Legal Guardian, I assume full responsibility as a condition for USTA's acceptance of my child's (or my) entry in the above events. By participating in this event, I give the Central Region permission to use photos and video of this athlete taken in conjunction with this event. Further, I agree to abide by all USTA rules.

I agree  Name: \_\_\_\_\_ Date: \_\_\_\_\_ Relationship: \_\_\_\_\_

Email this completed entry form to: [centralregionusta@gmail.com](mailto:centralregionusta@gmail.com)



# 2021 CENTRAL REGION CHAMPIONSHIPS

## TEAM ENTRY FORM

Sunday, June 20, 2021

Location: Stride Bank Center, 301 S. Independence St., Enid, OK 73701

Doors open at 7:30 a.m. The team competition will begin at 8:00 a.m.

**Entry Deadline: RECEIVED on or before May 1, 2021.**

**ENTRIES RECEIVED AFTER THE DEADLINE WILL NOT BE ACCEPTED. NO REFUNDS.**

|                                      |            |                  |  |
|--------------------------------------|------------|------------------|--|
| Team/Corps Name:                     |            | # of Members:    |  |
| Instructor(s):                       |            | # of Alternates: |  |
| Address:                             |            |                  |  |
| City:                                | State:     | Zip:             |  |
| Phone:                               |            |                  |  |
| Primary email for critique delivery: |            |                  |  |
| Org. Membership # if using:          | Org. Name: |                  |  |
| TEAM NAME:                           |            |                  |  |

**Team and trio fees are PER MEMBER, including alternates. Corps fees are PER CORPS.**

| DANCE TWIRL TEAMS |                                   |       |
|-------------------|-----------------------------------|-------|
| 1. LEVEL          | <input type="checkbox"/> RATING*  | 10.00 |
|                   | <input type="checkbox"/> OPEN     | 10.00 |
|                   | <input type="checkbox"/> REGIONAL | 12.00 |
| 2. AGE            | <input type="checkbox"/> Prim.    |       |
|                   | <input type="checkbox"/> Juv.     |       |
|                   | <input type="checkbox"/> Jun.     |       |
|                   | <input type="checkbox"/> Sr.      |       |
| 3. SIZE           | <input type="checkbox"/> Small    |       |
|                   | <input type="checkbox"/> Large    |       |
| TOTAL DT TEAMS:   |                                   | \$    |

| TWIRL TEAMS        |                                  |       |
|--------------------|----------------------------------|-------|
| 1. LEVEL           | <input type="checkbox"/> RATING* | 10.00 |
|                    | <input type="checkbox"/> NOVICE  | 10.00 |
|                    | <input type="checkbox"/> A       | 10.00 |
|                    | <input type="checkbox"/> AA      | 10.00 |
| (Regional)         | <input type="checkbox"/> AAA     | 12.00 |
| (Regional)         | <input type="checkbox"/> ELITE   | 12.00 |
| 2. AGE             | <input type="checkbox"/> Prim.   |       |
|                    | <input type="checkbox"/> Juv.    |       |
|                    | <input type="checkbox"/> Jun.    |       |
|                    | <input type="checkbox"/> Sr.     |       |
| 3. SIZE            | <input type="checkbox"/> Small   |       |
|                    | <input type="checkbox"/> Large   |       |
| TOTAL TWIRL TEAMS: |                                  | \$    |

| SHOW TEAMS        |                                   |       |
|-------------------|-----------------------------------|-------|
| 1. LEVEL          | <input type="checkbox"/> RATING*  | 10.00 |
|                   | <input type="checkbox"/> REGIONAL | 12.00 |
| 2. AGE            | <input type="checkbox"/> Prim.    |       |
|                   | <input type="checkbox"/> Juv.     |       |
|                   | <input type="checkbox"/> Jun.     |       |
|                   | <input type="checkbox"/> Sr.      |       |
| 3. SIZE           | <input type="checkbox"/> Small    |       |
|                   | <input type="checkbox"/> Large    |       |
| TOTAL SHOW TEAMS: |                                   | \$    |

| TINY TOT DANCE TWIRL TEAMS |                                  |       |
|----------------------------|----------------------------------|-------|
| 1. LEVEL                   | <input type="checkbox"/> RATING* | 10.00 |
|                            | <input type="checkbox"/> OPEN    | 10.00 |
| 2. SIZE                    | <input type="checkbox"/> Small   |       |
|                            | <input type="checkbox"/> Large   |       |
| TOTAL TOT TEAMS:           |                                  | \$    |

| TRIOS             |                                   |       |
|-------------------|-----------------------------------|-------|
| 1. LEVEL          | <input type="checkbox"/> RATING*  | 10.00 |
|                   | <input type="checkbox"/> OPEN     | 10.00 |
|                   | <input type="checkbox"/> REGIONAL | 12.00 |
| 2. AGE            | <input type="checkbox"/> Prim.    |       |
|                   | <input type="checkbox"/> Juv.     |       |
|                   | <input type="checkbox"/> Jun.     |       |
|                   | <input type="checkbox"/> Sr.      |       |
| TOTAL TRIO TEAMS: |                                   | \$    |

| DANCE TEAM         |                                  |       |
|--------------------|----------------------------------|-------|
| 1. LEVEL           | <input type="checkbox"/> RATING* | 10.00 |
| TOTAL DANCE TEAMS: |                                  | \$    |

| ARTISTIC GROUP   |                               |       |
|------------------|-------------------------------|-------|
| 1. LEVEL         | <input type="checkbox"/> OPEN | 10.00 |
| TOTAL ART.GROUP: |                               | \$    |

| PARADE CORPS (Per Corps) |                                   |       |
|--------------------------|-----------------------------------|-------|
| 1. LEVEL                 | <input type="checkbox"/> REGIONAL | 80.00 |
| TOTAL PARADE:            |                                   | \$    |

| ENTERTAINMENT CORPS (Per Corps) |                                   |        |
|---------------------------------|-----------------------------------|--------|
| 1. LEVEL                        | <input type="checkbox"/> REGIONAL | 100.00 |
| TOTAL ENTERTAIN. CORPS:         |                                   | \$     |

| REGIONAL CHAMPIONSHIP T-SHIRT: (\$20 each)                             |   |
|--|---|
| T-shirts must be ordered in advance. Pick up at the contest.           |   |
| Please use the dropdown box to select number of t-shirts in each size. |   |
| CHILD SMALL  | NUMBER OF PROGRAM BOOKS (\$5 each) <input type="checkbox"/> |
| CHILD MED  |   |
| CHILD LG   |   |
| ADULT SM   |   |
| ADULT MED  |   |
| ADULT LG   |   |
| ADULT XL   |   |
| TOTAL:   |   |

| FEES DUE                   |                                  |         |
|----------------------------|----------------------------------|---------|
|                            | Total Entry Fees:                | #VALUE! |
| # <input type="checkbox"/> | Non-Member Fee (\$5 ea.):        | \$0.00  |
|                            | T-shirts Total (\$20 each):      | \$0.00  |
| <input type="checkbox"/>   | Registration Fee (\$20):         | \$0.00  |
|                            | Pre-ordered Programs (\$5 each): | \$0.00  |
| <b>TOTAL DUE:</b>          |                                  | \$      |

Email this completed entry form to: [centralregionusta@gmail.com](mailto:centralregionusta@gmail.com)

\* Events not sanctioned by USTA

Special comments to contest director: \_\_\_\_\_



## 2021 CENTRAL REGION CHAMPIONSHIPS TEAM ENTRY FORM

| TEAM MEMBERS' NAMES | BIRTHDATE<br>(REQUIRED) | AGE<br>8/31/2021 | REQ'D FOR ALL, INCLUDES ORG. MEMBERS |                 |
|---------------------|-------------------------|------------------|--------------------------------------|-----------------|
|                     |                         |                  | USTA #                               | EXPIRATION DATE |
| 1. _____            | _____                   | _____            | _____                                | _____           |
| 2. _____            | _____                   | _____            | _____                                | _____           |
| 3. _____            | _____                   | _____            | _____                                | _____           |
| 4. _____            | _____                   | _____            | _____                                | _____           |
| 5. _____            | _____                   | _____            | _____                                | _____           |
| 6. _____            | _____                   | _____            | _____                                | _____           |
| 7. _____            | _____                   | _____            | _____                                | _____           |
| 8. _____            | _____                   | _____            | _____                                | _____           |
| 9. _____            | _____                   | _____            | _____                                | _____           |
| 10. _____           | _____                   | _____            | _____                                | _____           |
| 11. _____           | _____                   | _____            | _____                                | _____           |
| 12. _____           | _____                   | _____            | _____                                | _____           |
| 13. _____           | _____                   | _____            | _____                                | _____           |
| 14. _____           | _____                   | _____            | _____                                | _____           |
| 15. _____           | _____                   | _____            | _____                                | _____           |
| 16. _____           | _____                   | _____            | _____                                | _____           |

(List more on separate page)

**AVERAGE AGE:** \_\_\_\_\_

**##** Check box to calculate average age.

Do any members of this team twirl on other teams that will be competing at the contest? If so, list teams.

**MUSIC INFORMATION (REQUIRED OF ALL TEAMS)**

DT Team Selection Title: \_\_\_\_\_

DT Team Album Title: \_\_\_\_\_

Twirl Team Selection Title: \_\_\_\_\_

Twirl Team Album Title: \_\_\_\_\_

Entries must be submitted or postmarked by May 1, 2021.  
 Email entries accepted with PayPal payments.  
 PayPal link: [paypal.me/centralregionusta](https://paypal.me/centralregionusta)  
 Or make check payable to Central Region Council and mail to:  
 USTA Central Region Championships  
 Koralea Slagle, Contest Director  
 P.O. Box 133

Photo Release: By participating in this event, I/the athlete's parent(s) give the Central Region permission to use photos and video of this athlete(s) taken in conjunction with this event.



## 2021 USTA Central Regional Championships & PreTrials Competition

June 19-20, 2021

Stride Bank Center

301 S. Independence St., Enid, OK 73701

Sanctioned by:

The United States Twirling Association

Sponsored by:

Central Region Baton Council

Regionals/PreTrials Director: Koralea Slagle

Email: [centralregionusta@gmail.com](mailto:centralregionusta@gmail.com)

Entries Coordinator: Christina Giddens

Email: [navar35@msn.com](mailto:navar35@msn.com)



### Country Inn & Suites

710 Mill Run Rd.  
Enid, OK 73703  
580-599-0372  
\$85 plus tax  
Cut-off: 6-1-21



### Best Western GLo

123 W. Maine  
Enid, OK 73703  
580-540-4172  
\$99 plus tax  
Cut-off: 6-1-21



### SpringHill Suites

5815 KL Drive  
Enid, OK 73703  
580-540-4256  
\$98 plus tax  
Cut-off: 6-1-21



### La Quinta Inn & Suites

4814 W. Owen K  
Garriott  
Enid, OK 73703  
580-233-7100  
\$94 plus tax  
Cut-off: 6-1-21



### Holiday Inn Express

4702 W. Owen K  
Garriott  
Enid, OK 73703  
580-237-7722  
\$99 plus tax  
Cut-off: 5-21-21

### Central Region Baton Council Officers

Christina Barnett-Giddens, President,

[navar35@msn.com](mailto:navar35@msn.com)

Lynn Dell Harrell, Vice President, [lynndell@heilp.com](mailto:lynndell@heilp.com)

Amanda Guidroz, Treasurer, [aguidroz10@yahoo.com](mailto:aguidroz10@yahoo.com)

Anna Dolan, Secretary, [aodolan@comcast.net](mailto:aodolan@comcast.net)

**WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19  
ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT**

In consideration of being allowed to participate on behalf of the United States Twirling Association athletic program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation with regards to protection against infectious diseases. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the United States Twirling Association their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

**FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Name of participant: \_\_\_\_\_

Participant/Parent/Guardian Signature: \_\_\_\_\_

Date signed: \_\_\_\_\_