## Buffalo Skywalkers



1<sup>st</sup> - 2<sup>nd</sup> Graders will play on

Mondays @ 4:00 PM

3<sup>rd</sup> - 4<sup>th</sup> Graders will play on

Tuesdays @ 4:00 PM

5<sup>th</sup> - 6<sup>th</sup> Graders will play on

Wednesdays @ 4:00 Pm

1st & 2nd	(	)	Name:
3 <sup>rd</sup> & 4 <sup>th</sup>	(	)	Phone #:
5 <sup>th</sup> & 6 <sup>th</sup>	(	)	Address:

## **Waiver Form**

Must be signed by participant or parent if minor in consideration of the acceptance of entry, I waive and release any and all claims against the Confederated Tribes of Warm Springs Indian Reservation of Oregon, The Community Wellness Center, Northwest Youth Conference Staff or Committees and any other sponsors or director for any and all claims of damage whatsoever in any manner arising or resulting from my participation in this event. I attest and verify that I have full knowledge of the risk involved, and that I will assume and pay my own medical/ emergency expenses in the event of an accident, illness, or any other incapacity. I also attest that I am physically fit and sufficiently trained to participate in this event.

Signature of Participant	Date
Signature of Parent	 Date