

Great Plains Alliance Release Form

We the undersigned release the following parties from all responsibility and liability for any injury, damage, inconvenience or harmful action taking place at the Great Plains Alliance Tournament, June 29-July 1, 2017. The MN Comets, city of St. Cloud, College of St. Benedict, and the St. Cloud and Sauk Rapids school districts assume no responsibility or liability for injury, damage, inconvenience or harmful action occurring at the Great Plains Alliance basketball tournament. All participants are expected to have appropriate health insurance.

TEAM NAME _____

COACH'S NAME _____ ADDRESS _____ PHONE _____

1. Player's Name _____ Address _____ Phone _____

Parent Signature _____

2. Player's Name _____ Address _____ Phone _____

Parent Signature _____

3. Player's Name _____ Address _____ Phone _____

Parent Signature _____

4. Player's Name _____ Address _____ Phone _____

Parent Signature _____

5. Player's Name _____ Address _____ Phone _____

Parent Signature _____

6. Player's Name _____ Address _____ Phone _____

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8. Player's Name _____ Address _____ Phone _____

Parent Signature _____

9. Player's Name _____ Address _____ Phone _____

Parent Signature _____

10. Player's Name _____ Address _____ Phone _____

Parent Signature _____