

**City of Friendswood - Community Services Department
Waiver of Liability – Female**

Name of Participant: _____

Birthdate: _____ Age: _____

Home Address: _____ City: _____ Zip: _____

Work Phone: _____ Home Phone: _____

PLEASE READ CAREFULLY AND SIGN

Assumption of Risk & Waiver of Liability: Intending to be legally bound, do hereby, for myself, my executors and administrators, waive and forever discharge all rights and claims for injuries or damages which may hereafter occur to me against any person, organization, sponsor or entity for any and all damages which may be sustained and suffered, in connection with their association or entry in this league. I acknowledge I have read and fully understand and agree to the limits of my liability and accept the restrictions thereof.

Print Full Name

Date

Participant's Signature

Date