



**AGREEMENT TO PARTICIPATE** – This section **MUST** be signed by all coaches and players. This form may be photocopied.

In consideration of being allowed to participate in any way in the STATE GAMES OF NORTH CAROLINA athletic/sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury 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. If however I observe any unusual 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 NORTH CAROLINA AMATEUR SPORTS, 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 INJURY, DISABILITY, DEATH or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

**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.**

**PRINTED COACH NAME**

**SIGNATURE**

**HOME PHONE**

(Parent/Legal Guardian must sign if coach is under 18)

_____	_____	(____) _____
_____	_____	(____) _____
_____	_____	(____) _____

**PRINTED PLAYER NAME**

**SIGNATURE**

**HOME PHONE**

(Please print legibly)

(Parent/Legal Guardian must sign if athlete is under 18)

1. _____	_____	(____) _____
2. _____	_____	(____) _____
3. _____	_____	(____) _____
4. _____	_____	(____) _____
5. _____	_____	(____) _____
6. _____	_____	(____) _____
7. _____	_____	(____) _____
8. _____	_____	(____) _____
9. _____	_____	(____) _____
10. _____	_____	(____) _____
11. _____	_____	(____) _____
12. _____	_____	(____) _____
13. _____	_____	(____) _____
14. _____	_____	(____) _____
15. _____	_____	(____) _____
16. _____	_____	(____) _____
17. _____	_____	(____) _____
18. _____	_____	(____) _____
19. _____	_____	(____) _____
20. _____	_____	(____) _____