



PARTICIPANTS UNDER 18 YEARS OF AGE

This is to certify that I, _____,
as parent/guardian of _____,

with legal responsibility for this participant, do consent and agree to his/her release as provided in the Waiver and Assumption of Risk consent form, do hereby fully waive and release Sydney Psychos Flyball Team Pty Ltd from any and all claims for personal injury, property damage, or death that may result from participation in Flyball activities.

I release and agree to indemnify and hold harmless Sydney Psychos Flyball Team Pty Ltd from any and all liabilities incident to my minor child's involvement or participation in Flyball activities, even if arising from their negligence, to the fullest extent permitted by law.

I have read and understood the foregoing, and acknowledge my consent to the terms of this Waiver & Assumption of Risk by signing this Waiver.

Date: _____

Signature: _____

Name: _____

Address: _____

Telephone: _____