

CANADIAN NATIONAL SHUFFLEBOARD ASSOCIATION

ENTRY RELEASE FORM

The undersigned, as Player, Official, or worker, hereby agree to participate in a shuffleboard tournament sponsored by the Canadian National shuffleboard Association (CNSA), or affiliated District Club (district), I represent that I am familiar with the rules and regulations of Shuffleboard and am aware that there is a risk of accident or injury.

I hereby release the shuffleboard facility, the CNSA and District, their directors, officers, workers, employees and agents from any liability for sickness or injury to me while present at a tournament facility or engaged in the activities of the tournament.

This release is given in consideration for my participation in the tournament and for the specific purpose of protecting the facility owner, CNSA and District, and their representatives from
Liability

(Please print) Name of player

Signature

Date