

TEAM INFORMATION

TEAM NAME: _

NOTE: IF NAME IS TOO LONG OR INAPPROPRIATE IT WILL BE ABBREVIATED

TEAM AGE GROUP: AGES.TO.

PLEASE BE AWARE THAT THERE IS A TEAM FEE OF \$180.00 THAT MUST BE SUBMITTED AT THE SAME TIME AS THIS FORM, PLEASE ALSO NOTE THAT CHECKS SHOULD BE MADE OUT TO MU BROWN AND THAT CHECKS POSTDATED SHOULD MADE OUT FOR JUNE 1^{ST} , 2005, CASH PAYMENTS ARE DUE JULY 3^{RD} AND CAN BE DROPPED OFF AT THE FIRST CHECK IN DATE WHICH WILL BE LISTED ON THE WEBSITE.

IF YOU PLAN ON MAILING THE MONEY MAIL NO LATER THEN JUNE 20RD TO:
BC BREAKOUT
12255-102A AVE
5URREY, BC
V3V BA7

PLEASE MAKE CHECK PAYABLE TO: SHAWA SIVAN MEMO: BC BREAKOUT IN THE AMOUNT OF: 180,00 CDN FUNDS

POSTONTED CHECKS WILL BE DECLINED

FOR ANY ADDITIONAL INFORMATION PLEASE CONTACT US AT <u>BCBREAKOUT@GMAIL.COM</u> OR CHECK US OUT ON THE WEB AT <u>WWW.BCBREAKOUT.VZE.COM</u>

CAPTAIN'S INFORMATION

CAPTAIN'S NAME: _

CAPTAIN'S PHONE NUMBER: _

CAPTAIN'S ADDRESS:_

CAPTAIN'S EMAIL ADDRESS:_

CAPTAIN'S AGE: _

DATE OF BIRTH: #

MONTH DAY YEAR

HEIGHT: _

WEIGHT:_

GENDER:

IT IS AGREED THAT THE BC BREAKOUT SHALL IN NO WAY BE RESPONSIBLE OR LIABLE FOR ANY INJURY OF ANY KIND ARISING OUT OF, OR IN THE COURSE OF ANY OPERATION AT THE BC BREAKOUT EVENT. IT IS MY INTENTION TO WAIVE AND RELEASE ANY AND ALL CLAIMS, OF ANY KIND WHAT SO EVER, IN LAW OR IN EQUITY OF ANY INJURY OF ANY KIND ARISING OUT OF OR IN COURSE OF ANY OPERATION AT THE BC BREAKOUT EVENT. I GRANT THE BC BREAKOUT THE RIGHTS TO USE ALL PHOTOGRAPHS OR VIDEOS TAKEN OF ME DURING THE EVENT AT ANY TIME FOR WEBSITE USE, ADVERTISING, AND PROMOTIONAL PURPOSE. BY SIGNING BELOW I AM SHOWING THAT I AGREE TO ALL TERMS AT ALL TIMES.

SIGNATURE OF PARTICIPANT

PARTICIPANT FIRST AND LAST NAME

D∧T∈

IF BELOW THE LEGAL AGE OF 18 PLEASE HAVE A PARENT OR GUARDIAN OF 18 YEARS OF AGE OR OLDER SIGN THEN BELOW.

SIGNATURE OF PARENT

PARENTS FIRST AND LAST NAME

_∧⊤∈



PLAYER INFORMATION

PLAYERS DAME: _

PLAYERS PHONE NUMBER: _

PLAYER'S ADDRESS:_

PLAYERS EMAIL ADDRESS:_

PLAYER'S AGE: _

DATE OF BIRTH: #

MONTH DAY YEAR

HEIGHT: _ WEIGHT: _ GENDER: _

IT IS AGREED THAT THE BC BREAKOUT SHALL IN NO WAY BE RESPONSIBLE OR LIABLE FOR ANY INJURY OF ANY KIND ARISING OUT OF, OR IN THE COURSE OF ANY OPERATION AT THE BC BREAKOUT EVENT. IT IS MY INTENTION TO WAIVE AND RELEASE ANY AND ALL CLAIMS, OF ANY KIND WHAT SO EVER, IN LAW OR IN EQUITY OF ANY INJURY OF ANY KIND ARISING OUT OF OR IN COURSE OF ANY OPERATION AT THE BC BREAKOUT EVENT. I GRANT THE BC BREAKOUT THE RIGHTS TO USE ALL PHOTOGRAPHS OR VIDEOS TAKEN OF ME DURING THE EVENT AT ANY TIME FOR WEBSITE USE, ADVERTISING, AND PROMOTIONAL PURPOSE. BY SIGNING BELOW I AM SHOWING THAT I AGREE TO ALL TERMS AT ALL TIMES.

SIGNATURE OF PARTICIPANT

PARTICIPANT FIRST AND LAST NAME

DATE

IF BELOW THE LEGAL AGE OF 18 PLEASE HAVE A PARENT OR GUARDIAN OF 18 YEARS OF AGE OR OLDER SIGN THEN BELOW.

SIGNATURE OF PARENT

PARENTS FIRST AND LAST NAME

DATE

PLEASE PRINT THIS PAGE FOR EACH PLAYER ENTERING THE TOURNAMENT.