

**PARTICIPATION WAIVER**

Due to the physical demands of this sports program I, \_\_\_\_\_, the parent of \_\_\_\_\_ understand that there is a risk of personal injury to my child by participating in the Cincinnati Trailblazers sports program and accept complete responsibility for my child's health and well being in this program. I also understand that no responsibility is assumed by the coach or staff and will not hold them liable in the event of a personal injury.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date