



SINGLE WAIVER FORM FOR CROSS COUNTRY 2017

I attest that all the athletes that will be participating from our school in the MSTCA cross country meets are student athletes, in good standing, in our high school and are bona fide members of our team. Our school district recognizes that there are certain risks associated with participation in this sport and waives releases and holds harmless the MSTCA organization, its officers, sponsors and representatives, as well as the host facility from any injury that may be incurred by an athlete in the normal course of participation in these MSTCA events.

This waiver acknowledges I have read and understand the following policies:

1. All payments either purchase order or check must be received prior to competition date.
2. MSTCA Tent Policy
3. MSTCA Drone Policy
4. MSTCA Coaches Emergency Action Plan

School's Name _____

Boys' Team _____ Girl's Team _____ Both _____

Principal/OR Athletic Director's Signature _____

Print Principal/OR Athletic Director's Name: _____

Coaches Signature: _____

Print Coaches Name: _____

School's Phone Number _____

Date _____

Please attach your cross country teams' roster

Mail it immediately to: Jim Hoar 31 Campion Road Yarmouthport, MA 02675

Or scan/email to: hoarj@dy-regional.k12.ma.us

THIS MUST BE RECEIVED NO LATER THAN SEPTEMBER 20, 2017.

Failure to turn in at deadline, will result in a late fee of \$50, per gender team.