

MSTCA SINGLE WAIVER FORM – FALL 2018

Please take the time to have this waiver form signed, attach your roster, and mail it in. Once you do that, your waiver responsibilities for the fall are completed!

I attest that all the athletes that will be participating from our school in the MSTCA fall 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 participating in this sport and waives, releases, and holds harmless the MSTCA organization, its officers, sponsors and representatives, as well as the host community, from any injury that may be incurred by an athlete in the normal course of participation in these MSTCA events. My school also agrees to have a PO or payment in the hands of MSTCA before any meet they compete in.

THIS IS NOT AN ENTRY FORM

| School's Name | | |
|---|------------|------|
| Boys Team | Girls Team | Both |
| Principal OR Athletic Director's Signature | | |
| School's Phone Number | | |
| Date | | |
| Please attach your cross country teams' rosters and mail everything to: | | |

Jim Hoar 31 Campion Road Yarmouthport, MA 02675

THIS MUST BE RECEIVED NO LATER THAN WEDNESDAY, SEPTEMBER 19, 2018