

Unified Sports School Team Form

School Name: _____

Team Name: _____

Sports Interested In ☐ Bowling ☐ Basketball ☐ Track & Field

Team Supervisor: _____

Team Supervisor's Email Address: _____

WAIVER

The school listed above (the "School") acknowledges it assumes all risk for any person participating with the team designated above (the "Team") in training and competition activities related to the Unified Sports School Invitational, including but not limited to students, faculty, staff, parents or volunteer coaches or chaperones. The School shall indemnify and defend Special Olympics Minnesota, Inc., its employees, officers, directors, volunteers and agents from any claims, demands, liabilities, causes of action, suits, judgments, damages, attorney's fees and costs and other expenses relating to the Team's training and competition activities related to Unified Sports School Invitational. The School expressly waives any claim it might have or make against Special Olympics Minnesota, Inc. for any illness, injury, death, theft, loss, loss of use or damage to personal property or inconvenience (collectively, a "Loss") arising out of or relating to School's activities related to the Unified Sports School Invitational, notwithstanding that the Loss is attributed to negligence or willful misconduct on the part of Special Olympics Minnesota, Inc.

School Representative Printed Name: _____

School Representative Signature: _____

Date: _____