

INT. TRADITIONAL GAMES CERTIFICATION CLINIC Levels I & II
Wolf Point, MT June 7-9, 2010 REGISTRATION/RELEASE FORM

Wolf Point Indian Education Committee (WPIEC)/JOM sponsored Certified Instructor Traditional Games Clinic. Send registration/release form to: Carolyn Rusche - print, sign, scan, Email: crusche@nemont.net or bring/snail mail to District Office: 220 4th Ave South, Wolf Point, MT 59201-1528. For questions - Carolyn - District Office ph: 406-653-2361 – ext 112 / cell phone 406-650-7679. Free to eligible school district employees and community to a maximum of 40 participants.

(Assurance notification of attendance will hold place in clinic by the order received)

NAME: _____

(Please print clearly)

E-mail address: _____

Residence ADDRESS: _____

PHONE: (w) _____ (h) _____

(c) _____

Wolf Point School Represented: _____

This clinic is sponsored by JOM - and is free for eligible Wolf Point School district employees and community members to a maximum of 40 participants. **NOTE: A Registration/release form is required.**

REGISTRATION Level: _____ **Level I** _____ **Level II**

Previous Level I certification required for Level II. Completed Level I - YES _____ **details below**

Clinic Date: _____

Place: _____

Wolf Point High School 213 6th Ave South - June 7 – 9, 2010

Tribal Affiliation: _____ or Non-Native _____

How will you be using the knowledge received in this certification? _____

Required RELEASE FORM follows . . .

In consideration of being allowed to participate in any way in the International Traditional Games program, related events, and activities, the undersigned acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death: and, while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others, and assume all responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
4. I, for myself and on behalf of my heirs, assigns, personal representative and next of kin, hereby release and hold harmless the International Traditional Games, its officers, officials, agents and / or employees, and other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), with respect to any and all injury.
5. I give my permission for the free use of my name and/or pictures for use in broadcasts, telecasts, newspapers, etc., for the promotion and information purposes of the event organizers,.

I have read this Release of Liability and Assumption of Risk Agreement, fully understand that I have given up substantial rights by signing it. I sign freely and voluntarily without any inducement.

Date: _____

Participant signature: _____