

# ATHLETE WAIVER

Full Name

Email Address

Gender

Street Address

City

Province/Region

Zipcode

Country

Date of Birth

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Initial here:

[Redacted]

Initial here:

[Redacted]

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

[Redacted]

Initial here:

I agree to these terms.

Sign your name below:

Please read the [Electronic Records and Signature Disclosure](#)  
 I agree to use electronic records and signatures