



Alabama Division Qualifier Waiver

I hereby waive and release all rights and claims for damages I may have against the Alabama Division of the United States Fencing Association, the U.S. Fencing Association, the officials, managers, sponsors and other participants from any and all liabilities arising from illness, losses, injuries, or damages I may suffer as a result of my participation in any Alabama Division Qualifying fencing tournaments. I attest and verify that I am physically fit and have sufficiently trained for this competition. I further waive all rights to any photographs, videotapes, and recordings of this event for any purpose. I understand and appreciate that participation in the sport of fencing carries a risk to me of serious injury, including permanent paralysis or death.

Signature: _____ Date: _____
(If under 18, parent or guardian must sign)

Consent for Medical Treatment

I give my consent to representatives of the Alabama Division of the U.S. Fencing Association to obtain medical care from physicians, clinics, or hospitals for any illness and/or injury that could arise during the Alabama Division Qualifying fencing tournaments.

Person to contact in emergency:
_____ Phone: _____

Relationship: _____ Signature: _____ Date: _____
(If under 18, parent or guardian must sign)