



Excalibur Fencing Club is a member club of the United States Fencing Association. We carry the association's insurance coverage and follow the safety rules prescribed by the USFA. But we also recognized that fencing carries risk of injury. Therefore, in the event of an accident involving you (or your child), we ask that you sign the following waivers attesting to your understanding of the risks involved and allowing Excalibur Fencing Club to provide medical care in the case of injury and there is no parent or guardian present.

This form will be valid for the 2005-2006 fencing season, September, 2005-June, 2006.

Name _____
(Please Print)

All Participants MUST Read and Sign Each of the Following Statements
(for athletes under the age of 18, a parent or guardian must also sign)

WAIVER OF LIABILITY: Upon agreeing to fence at Excalibur Fencing Club, I agree to become a member of the United States Fencing Association and to abide by the current rules of the USFA. I enter into fencing related activities at my own risk and release the Excalibur Fencing Club, the Chatham Club, and its sponsors, referees, and tournament organizers from any liability arising from such activities.

Fencer's Signature _____ Date _____ Signature of Parent or Guardian for Minor _____ Date _____

CONSENT FOR MEDICAL TREATMENT: This is to certify that I, _____, give my consent to the Excalibur Fencing Club and its representatives to obtain medical care from any licensed physician, hospital or clinic for the above named athlete for any injury or illness that may arise during activities associated with fencing events at Excalibur Fencing Club, club tournaments sponsored by other USFA clubs, the New Jersey Division of the USFA, or national tournaments sponsored by the USFA (North American Cups, Junior Olympics, Age Group Events, National Championships, Summer Nationals).

Fencer's Signature _____ Date _____ Signature of Parent or Guardian for Minor _____ Date _____

PERSONAL DATA

Parent's Names (if under 18) or Contact in case of injury _____ Parent's Email _____

Student's Email _____

Address _____

Home Phone _____ Work Phone _____