



# ODFT 100 hole Golf Marathon Golfer Waiver Liability Form



Please **read and sign** this form, **fill out** the information and return it to Open Door.

- Yes! I have volunteered to be a Golfer/fund-raiser
- I will pledge at least \$100 myself in order to help ODFT and influence others to do the same.
- Yes! I have read the Medical Information & Waiver liability and understand and agree to the terms.

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Golfers's Name: \_\_\_\_\_

Age: \_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_

\_\_\_\_\_

Person to notify in case of emergency: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone number: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone number: \_\_\_\_\_

I recognize that there is some element of risk in any sport or activity. Understanding the inherent risk, dangers, and rigors involved in the above- mentioned golf marathon. I certify that I am fully capable of participating in this golfing event.

I hereby assume all risks involved in playing in the above mentioned golfing event. I and my heirs, successors, and assigns will hold the host organization, Open Door for Teens and the management and owners of the golf course harmless from any and all liabilities, actions, causes of action, debts and claims resulting from the above mentioned bowling event.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_