



CORNHUSKER STATE GAMES TEAM/DOUBLES ENTRY FORM

FOR OFFICE USE ONLY

Date Received	_____
Amt. Received	_____
#	_____

Enter online at CornhuskerStateGames.com or mail completed form to:

Cornhusker State Games, P.O. Box 29366, Lincoln, NE 68529-0366. Fax credit card entries and waiver forms to: 402.471.9712.

NOTE: Entries must be postmarked by May 31 to avoid the late fee. Entries postmarked after June 7 will not be accepted. Athlete must be a resident of Nebraska for at least 30 days prior to competition. Before completing the entry form, consult the sport's instructions and regulations at CornhuskerStateGames.com. **ENTRIES WILL NOT BE ACCEPTED WITHOUT VALID PHONE NUMBER.**

SPORT ENTERED: Check only one sport. Additional entry forms are necessary if you are competing in more than one sport.

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Adventure Race | <input type="checkbox"/> Dodgeball | <input type="checkbox"/> Racquetball—Doubles | <input type="checkbox"/> Softball—Slow Pitch |
| <input type="checkbox"/> Aquatics—Swimming Relays | <input type="checkbox"/> Electronic Darts—Teams/Doubles | <input type="checkbox"/> Rugby | <input type="checkbox"/> Table Tennis—Doubles |
| <input type="checkbox"/> Aquatics—Open Water Swimming Relays | <input type="checkbox"/> Flag Football | <input type="checkbox"/> Sailing (On-Site Registration Only) | <input type="checkbox"/> Tennis—Doubles |
| <input type="checkbox"/> Badminton—Doubles | <input type="checkbox"/> Foosball—Doubles | <input type="checkbox"/> Shooting—Senior High Trap Teams | <input type="checkbox"/> Triathlon—Teams |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Horseshoe Pitching—Doubles | <input type="checkbox"/> Shooting—Junior High Trap Teams | <input type="checkbox"/> Tug of War |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Soccer | <input type="checkbox"/> Ultimate Frisbee™ |
| <input type="checkbox"/> Baton Twirling—Duets/Teams | <input type="checkbox"/> Pocket Billiards—Teams | <input type="checkbox"/> Softball—Girls Fast Pitch | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Bowling—Teams | | | |

PLEASE TYPE OR PRINT CLEARLY

LAST NAME _____	FIRST NAME _____	DAY PHONE _____	EVENING PHONE _____
ADDRESS _____	CITY _____	STATE _____	ZIP Code _____
EMAIL _____	AGE _____	SEX _____	BIRTHDATE _____

PERSON TO CONTACT IN CASE OF EMERGENCY

LAST NAME _____	FIRST NAME _____	PHONE _____
-----------------	------------------	-------------

PLEASE LIST YOUR FAVORITE HIGH SCHOOL: _____

CHECK THIS BOX AND INCLUDE \$10 TO HAVE YOUR TEAM BOX SHIPPED

CHOOSE PACKET SHIPPING! Packet shipping allows you to receive your shirt, yearbook, event pass and sponsor gifts more than a week before the Opening Ceremonies. Choosing this option means saving time and avoiding hassles like waiting in line or running across town between games.

CONSULT SPORT INFORMATION FOR EVENT NAMES AND SPECIAL INSTRUCTIONS

COMPLETE EVENT NAME

(Example: Soccer, Competitive Girls, Under 13)

TEAM NAME

SHIRT SIZE (CIRCLE ONE)

YOUTH: 6-8 10-12 14-16 ADULT: S M L XL XXL (\$1 Extra) XXXL (\$2 Extra)

SPECIAL INSTRUCTIONS

(Example: Finished 2nd place in 2008)

COMPLETE TEAM ROSTER AND WAIVER FORM

CHECKOUT

Make check or money order payable to Cornhusker State Games or enter credit card info below.

ENTRY FEE: \$ _____

SURCHARGE: \$ _____
per XXL \$1 or XXXL \$2

\$10 SHIPPING: \$ _____
Packet Shipping Optional

DONATION: \$ _____
Voluntary, tax deductible contribution

TOTAL: \$ _____

WAIVER MUST BE SIGNED BY COACH/TEAM REPRESENTATIVE & ALL PLAYERS ON TEAM ROSTER (PARENT OR GUARDIAN MUST SIGN IF ENTRANT IS 18 OR YOUNGER)

CREDIT CARD INFO

MasterCard VISA Discover American Express Card Number _____

Cardholder's Signature _____ Expiration Date _____ Security Code _____
(3 digit code on back of card)

TEAM WAIVER AND RELEASE OF LIABILITY

This document is important, should be read in its entirety and signed.



In consideration of being allowed to participate in any way in the CORNHUSKER STATE GAMES athletics/sports program and related events and activities, the undersigned:

1. Agrees that prior to participation, he/she will inspect the facilities and equipment to be used, and if he/she believes anything is unsafe, will immediately advise his/her coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledges and fully understands that he/she will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from his/her own actions, inactions or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known or not reasonably foreseeable at this time.
3. Assumes all the foregoing risks and accepts personal responsibility for the damages following such injury, permanent disability or death.
4. Releases, waives, discharges and covenants not to sue the CORNHUSKER STATE GAMES, its affiliated clubs, their respective administrators, directors, agents, coaches and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releasees", from the demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
5. Understands the following refund policy: There will be NO refunds of entry fees because of inclement weather or other acts of nature. The only exceptions to the no-refund policy are: *Entries received after the entry deadline *Entries received after the maximum number of teams are bracketed, or if there are not enough teams or individuals to form a division *Entries of non-qualified entrants *Entries of those prohibited from participating due to errors made by the Cornhusker State Games *Special circumstances as determined on an individual basis by the Board of Directors and requiring board action. **NO REFUNDS WILL BE PERMITTED SIMPLY BECAUSE AN ATHLETE FAILS TO PARTICIPATE.**
6. Agrees to allow the Cornhusker State Games to photograph him/her during the Cornhusker State Games and related events and to display his/her image in promotion of the Cornhusker State Games.
7. Pledges to adhere to the Cornhusker State Games standards of sportsmanship and respect opponents, coaches, officials and spectators at all times by not engaging in verbal or physical altercations at any time before, during or after competition.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY. THIS FORM WAIVES LIABILITY FOR NEGLIGENCE. THIS AGREEMENT CANNOT BE MODIFIED ORALLY.

TEAM NAME

SPORT

SIGNATURE

DATE

PARENT OR GUARDIAN MUST SIGN
(IF ENTRANT IS 18 OR YOUNGER)

TEAM ROSTER & TEAM MEMBERS' WAIVER

All team members must sign (*parent or guardian must sign if entrant is 18 or younger*).

Entry will be returned if not COMPLETED IN FULL. PLEASE PRINT OR TYPE CLEARLY.

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

LAST NAME FIRST NAME PHONE SHIRT SIZE SIGNATURE

ADDRESS CITY ZIP SEX DOB

Please mail completed waiver form to **Nebraska Sports Council, P.O. Box 29366, Lincoln, NE 68529** or fax to **(402) 471-9712**.