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WISCONSIN HORSESHOES



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PARTICIPANT LIABILITY RELEASE (REQUIRED)

In consideration of participating in such activity, I hereby waive, release and forever discharge the National Horseshoe Pitchers Association, the Wisconsin Horseshoe Pitchers Association, all officers, employees, agents and servants of the afore stated organizations and all fellow participants in any and all sanctioned leagues and sanctioned tournaments in Wisconsin for the year of 2015, for any and all action, causes of actions, damage, loss or injury which I may suffer as a consequence of participation in any of these afore stated sanctioned events.

PARTICIPANTS OR LEGAL GUARDIANS SIGNATURE _____ DATE ____/____/____

If You Have Questions Please Contact:

WHPA President Gary Volz whpagvolz@gmail.com 608-444-8563

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