



LOCATION: JOLIET JUNIOR COLLEGE

INSTRUCTOR: TIM GRAF

In consideration of your acceptance of this entry, I do hereby release and forever discharge for myself, my heirs, executors and administrators, any and all claims to collect damages which may be incurred at this training, and any and all rights to such damages against GSE, Tim Graf, Sue Graf, GSE staff and Joliet Junior College.

Signature _____ Date _____
(Parent, if Minor)

Athlete's Printed Name _____ Age _____

Address _____
Street City State Zip

School _____ Year in School _____

Sports Played _____