

**HOAGLAND DAYS CORN HOLE Tournament Event Entry Form**

**Sponsored by: Zwick & Jahn Funeral Home**

**June 16 2018 1PM** located near the adult beverage tent

**Roster: 2 INDIVIDUALS PER TEAM**

**Awards: Special prizes for top three teams**

**Entry Fee:** \$20 per team (cash or Make checks payable to HAAA).

No refunds except for tournament cancellation.

**Entry Deadlines: Midnite Thursday 6-14-18** - \$5.00 late fee if accepted after deadline.

**Maximum of 32 teams will be accepted on a first come first serve basis**

**Basic Rules:**

1. Single elimination tournament best two out of three to 21 points – first to 21 or greater wins (do not need to hit 21 exactly due to time constraints and reverse international rules).  
Standard scoring 3 points in the hole, one point for bags on the board. bags hitting the ground ahead of landing on the board to be removed as a miss.
3. All participants must sign an insurance release form to participate. All participants under the age of 18 must have an insurance release form signed by a parent to be able to participate. Pre-signed waiver forms are encouraged
4. Boards and Bags will be furnished

**Send entry fee and registration**

**Pizza Pub, 14810 1<sup>st</sup> Street, Hoagland, IN 46745**

**ATTN: Alex Wyss**

**For more information call or email**

**Alex Wyss [awyss12@gmail.com](mailto:awyss12@gmail.com) 260-580-7088 Ron Jeffrey [ronaldjeffrey7@yahoo.com](mailto:ronaldjeffrey7@yahoo.com)**

**Registration form Deadline is Midnite Thursday 14 June, 2018**

Team Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address / State / Zip: \_\_\_\_\_

Team Name: \_\_\_\_\_

Team Members: \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

## RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, \_\_\_\_\_ (“Participant”),  
acknowledge that I have voluntarily applied to participate in the following activities at Hoagland  
Days (The “Fair”):

(Description of activities, which Participant will engage in.) **Corn Hole**

**I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES AND THAT I COULD BE SERIOUSLY INJURED. I AM VOLUNTARILY PARTICIPAING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.**

As consideration for being permitted by the Fair, to participate in these activities and use the Fair premises and facilities, I forever release the Fair, any fair affiliated organization, and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively “Releasees”) from any and all actions, claims, or demands that I, my assignees, heirs, distributes, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, related to (i) my participation in these activities, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, by any Releasee, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in these activities. I also agree that I, my assignees, heirs, distributes, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attaché the property of any Releasee in connection with any of the matters covered by the foregoing release.

**I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS, I AM AWARE THAT THIS IS A RELEASE OF LIABITLIY AND A CONTRACT BETWEEN MYSELF AND THE FAIR, AND SIGN IT OF MY OWN FREE WILL.**

**If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them.**

Executed at Hoagland, Indiana on the \_\_\_\_\_ day June, 2018.

**PARTICIPANT/RELEASOR**

**PARENT OR GUARDIAN**

Signed name: \_\_\_\_\_

Signed name: \_\_\_\_\_

Printed name: \_\_\_\_\_

Printed name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED.**

Signed name: \_\_\_\_\_

Signed name: \_\_\_\_\_