TO OFSAA CHAMPIONSHIPS

SIGNATURE FORM

Name of Championship: _____

Location:_____ Date: _____

Name of School Attending:_____ Association: _____

Name of Teacher: _____ Phone: _____

A participant is defined as, "Anyone who has been granted proper authorization to enter a restricted area." "Restricted area" includes "those areas occupied by athletes and to which access by the general public is restricted or prohibited.".... **This includes coaches, managers, supervisors, etc.....**

We, the following participants, acknowledge that we have read and understand the Rules of Behaviour For Participants to OFSAA Championships, and that we agree to abide by them.

LIST OF ALL PARTICIPANTS

NAME (Printed)	SIGNATURE