

ST. JOHN OF DAMASCUS ACADEMY  
2010 ANNUAL 100-HOLE

*Golf Marathon*

MAY 17, 2010



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**MEDICAL INFORMATION & WAIVER OF LIABILITY**

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Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Relationship \_\_\_\_\_

Emergency Contact Phone # \_\_\_\_\_

Physician \_\_\_\_\_

Physician Phone # \_\_\_\_\_

I recognize that there is an element of risk in any outdoor sport or activity. Understanding the inherent risks, dangers, and rigors involved in St. John of Damascus Academy's Golf Marathon, I certify that I am fully capable of participating and hereby assume all risks involved in playing in this golf event. I and my heirs, successors, and assigns will hold St. John of Damascus Academy, St. Athanasius Orthodox Church, and the management and owners of the host golf course harmless from any and all liabilities, actions, causes of action, debts and claims resulting from the above-mentioned golf event.

Signature \_\_\_\_\_

Date \_\_\_\_\_