

2017 华夏智力运动会报名表(_____分校)

报名费: \$5/运动员。每表限一人, 每人限报一个单项。报名截止:2017/10/15,

比赛日期: 2017/10/22. 8:30 am - 4: 30 pm

比赛地点: Bridgewater-Raritan High School, 600 Garretson Road, Bridgewater, NJ 08807

运动员姓名:	Name in English:
运动员性别: 男() / 女()	出生年月日(学生项目须填写): YYYY /MM/DD:
父/母姓名:	父/母电话: () 父/母电子邮件:

项目 (按成绩取前六名)				
围棋 (Go)	9x9	初级	段级	----n/a----
象棋 (Xiangqi)	学生	----n/a----	----n/a----	成人
国际象棋 (Chess)	儿童一组	儿童二组	少年组	成人
五子棋 (Wuziqi)	儿童组	----n/a----	少年组	成人
国际跳棋 (Checkers)	学生	----n/a----	----n/a----	----n/a----
数独 (Sudoku)	学生	----n/a----	----n/a----	----n/a----
桥牌	----n/a----	----n/a----	----n/a----	团体
四国大战	----n/a----	----n/a----	----n/a----	成人
升级	----n/a----	----n/a----	----n/a----	成人

ASSUMPTION OF RISK AND RELEASE

I, _____, allow my son/daughter _____ to participate in the 2017 Huaxia Mindsports Game which will be held on Oct, 22, 2017 at Bridgewater-Raritan High School, 600 Garretson Road, Bridgewater, NJ 08807. I understand that there are risks associated with the participation in the game. I understand the risks include personal injury, disability and even death. I voluntarily assume all the risks involved in participating in the game. I irrevocably and unconditionally release and hold harmless Huaxia Chinese School, include all branch schools and those acting on its behalf from any and all lawsuits, claims, and actions arising from or connected with my son or daughter's participation in the game, failure to deliver emergency medical services in a prompt fashion, failure to properly handle a medical emergency in which my son or daughter is injured.

I sign this release with the intent to be legally bound by it. I am the parent or legal guardian of _____.

Signature

Print Name