

Breakdown Great Northwoods League Insurance Information



2009-10 Great Northwoods League

Players Name: _____
High School: _____ Grade: _____
Address: _____
City: _____ Zip: _____
Email: _____
Signature: _____ Date: _____

I am the parent or guardian of the named participant for The Breakdown Great Northwoods League. I hereby give my approval to the participant in the scheduled activities of the League. I also assume all the risks and hazards to incidental contact or injuries and transportation. Minnesota Sports Preview and The Breakdown is not responsible for any incidental hazard.

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