## PARTICIPATION RELEASE FORM

Name:	Date of Birth:	
Home Address:	Home Phone:	
	Email:	
I hereby release The University of Michigan, the Brazilian Jiu-Jitsu and Submission Wrestling Club and their agents, representatives, and assigns from any responsibility or liability for any damages arising from personal injuries or property damage or loss relating to my participation, or the use or operation of equipment related to the sports activities of said organization, including the Wolverine Classic tournament. I further release The University of Michigan, the Brazilian Jiu-Jitsu and Submission Wrestling Club and their agents, representatives, and assigns from any responsibility or liability for any damages incurred to person or property stored in any University of Michigan facilities.		
I verify that I have no physical handicaps or impairments that activities. I will abide by all University and applicable Club	• • • •	* *
Signature of Participant	•	Date