

If you have pre-registered with Myron, please return the Registration Form/Release of Liability the morning of the tournament (or any time prior to the event), with the suggested donation per golfer.

You are welcome to use the online QR code for making payment.



Revised August 2024



BENEFIT GOLF TOURNAMENT



(2024 Benefit Golf Participants)

Pine Edge Golf Course

Goessel, Kansas

Saturday, September 20, 2025

9:00 a.m. Shotgun Start

Please contact Myron Schmidt, in person, at 620-747-0707 or email luvmilk@mtelco.net to pre-register your team.

**RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT &
CONSENT AND RELEASE FOR USE OF LIKENESS IN MULTIMEDIA**

In consideration for being a participant in the Golf Tournament hosted by Goessel Community Foundation (herein after "Golf Tournament"), the undersigned acknowledges, appreciates, and agrees that:

Participating in the Golf Tournament is a potentially hazardous activity which could cause bodily injury or death, in some circumstances.

I knowingly and freely assume all such risks (both known and unknown, even if arising from the negligence of others) of participating in the Golf Tournament. I certify that I am more than 18 years of age, and that this Release remains in full force and in effect until specifically revoked in writing by me.

If the participant is under the age of 18 years of age, the undersigned parent and/or legal guardian does hereby acknowledge and assume all such risks (both known and unknown, even if arising from the negligence of others) of the minor participating in the Golf Tournament.

I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release and hold harmless the Golf Tournament, Myron Schmidt and family, Pine Edge Golf Course, Central Kansas Community Foundation, Goessel Community Foundation, all event sponsors, their representatives, and their employees or agents ("Releasees"), for any and all personal injury, disability, death and/or any loss or damage to person or property I, or the minor child in my care, may suffer participating in the Golf Tournament, including but not limited to injury, disability, death, loss or damage as a participant in the Golf Tournament.

This Release applies to any injury, including without limitation, personal bodily or mental injury, economic loss or damage resulting therefrom. I further hereby release the Releasees from all liability arising from any such injury resulting from my failure to recognize any pre-existing condition, limitation, or specific sensitivities of which could cause harm to others, myself, or the minor in my care.

This Release and Indemnification shall be as broad and inclusive as is permitted by the State of Kansas. If any portion is held invalid, the balance shall continue in full force and effect.

In addition, I, the undersigned, consent to having my image or likeness used in print or digital photograph(s), as part of a video and/or in interviews for purposes of education and/or public relations for Central Kansas Community Foundation, including their Affiliates as well as for the news media. Such education and public relations may include but are not limited to advertising, videos, sound bits, news releases, newsletters, brochures, and/or fundraising materials.

Participant's Signature _____

Date _____



Benefit Golf Tournament

REGISTRATION

September 20, 2025

9:00 a.m. Shotgun Start

NAME & ADDRESS OF GOLF PARTICIPANT:

Cell Phone # _____

_____ **\$50 Suggested Donation to Operating Fund**

Cash _____ **Check** _____ **On-line** _____

(Donations for golfing are not tax-deductible.)