

# ADO PLAYER REPRESENTATION AGREEMENT FOR A NATIONAL EVENT

I, \_\_\_\_\_, in recognition of my selection to represent the U.S. in an ADO National Finals, agree that I must comply with the established rules of the ADO at all times. In particular, I acknowledge the following and agree to abide by the specific conditions:

- 1) I will comply with all official directions and requests of the ADO personnel on site.
- 2) I will conduct myself in a sportsmanlike manner as a player and representative of the ADO both during play and outside the playing area.
- 3) I will adhere to the ADO dress code at all times during the entire event keeping my appearance respectfully neat and clean. ADO shirts are to be worn with black dress slacks (NO JEANS) and dark colored closed-toe shoes (NO TENNIS SHOES). No hats, caps, or headgear of any kind are allowed. Inappropriate clothing and/or clothing with inappropriate logos or statements will NOT be allowed in the tournament hall during the entire weekend. Infringement of these guidelines may result in official action which could result in, but not be limited to, banning of the player(s) from ALL future ADO programs for a period to be determined by the full Board of Directors.
- 4) I shall make myself available for any media interviews and public appearances as required by the ADO personnel on site.
- 5) Where I have a pre-existing medical condition that is not covered by my insurance, I agree to be responsible for any costs incurred for treating that condition during my period of official travel. If the medical condition affects my ability to travel, I agree to notify the ADO of any special arrangements that are medically necessary and provide documentation from my medical provider.
- 6) I understand that any breach of the above conditions may result in my representative status being withdrawn and that such a decision by the ADO personnel on site shall be final.
- 7) I understand that any breach of the above conditions and their implied code of conduct may result in me being returned home at any time during the above event. In such a circumstance, I agree that I will be personally responsible for any additional travel charges incurred by the ADO to that end.

The ADO does not accept liability arising out of the activities of team members during their free time or for potential losses due to changes in the program, travel delays and personal conduct. If you are uncertain how this waiver might affect you, consult with legal counsel before signing and returning.

**I hereby indemnify the ADO against all claims and/or damages that may occur to me or be caused by me as a representative of the ADO and I agree to all of the conditions stated above.**

Name: (please print full name) \_\_\_\_\_

Address: \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_