PICKLEBALL TOURNAMENT WAIVER OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

Player Name	E-Mail Address		Phone
Home Address	City	State	Zip
Date of Birth	Skill Level		

Doubles Partner's Name (for tournament reference): _____

Emergency Contact Person

_____

Name Phone

Because physical exercise can be strenuous and subject to risk of serious injury, the club urges you to obtain a physical examination from a doctor before using any exercise equipment or participating in any exercise activity. You (each member, guest, or participant) agree that if you engage in any physical exercise activity, or use any club amenity on the premises or off the premises including any sponsored club event, you do so ENTIRELY AT YOUR OWN RISK. You agree that you are voluntarily participating in these activities and use of the facilities and premises and assume all risks of injury, illness, or death.

This waiver of liability includes without limitations, all injuries which may occur as a result of (A) Your use of all amenities and equipment in the facility and your participation in any activity, class, program, personal training or instruction (B) the sudden and unforeseen malfunctioning of any equipment (C) our instruction, training, supervision, or dietary recommendations and (D) Your slipping and/or falling while in the club, or on the club premises, including adjacent sidewalks and parking areas.

You acknowledge that you have carefully read this "Waiver and Release" and fully understand that it is a release of liability. You expressly agree to release and discharge the health club, and its affiliates, employees, agents, representatives, successors, or assigns from any and all claims or causes of action and you agree to voluntarily give up or waive any right you may otherwise have to bring a legal action against the club for personal injury or property damage.

If any portion of this release from liability shall be deemed by a court of competent jurisdiction to be invalid then the remainder of this release of liability shall remain in full force and effect and the offending provision or provisions severed here from.

By signing this release, I acknowledge that I have read, understand, agree to, and will abide by, all terms of this document. I further understand that this release cannot be modified orally.

Signed_____Dated_____

1. Assumption of Risk: I understand that participation in pickleball involves physical activity and inherent risks of injury, including but not limited to sprains, fractures, concussions, and other bodily harm. I voluntarily assume all risks, known and unknown, associated with participation in this Event.

2. Release and Waiver: I hereby release, waive, discharge, and covenant not to sue the tournament organizers, sponsors, facility owners, volunteers, referees, and all other affiliated parties (collectively, "Releases") from any and all liability, claims, demands, actions, or causes of action arising out of or related to any loss, damage, or injury, including death, that may be sustained by me or my property while participating in or traveling to/from the Event.

3. Medical Authorization: I grant permission for the Event staff or medical personnel to provide or arrange emergency medical care for me if necessary, and I assume full financial responsibility for any resulting expenses.

4. Photo/Video Release: I grant permission for my image and likeness to be used in promotional materials, media, or social platforms related to the Event without compensation.

5. Compliance: I agree to follow all tournament rules, regulations, and directions provided by the organizers and officials. We are using USA Pickleball Official Rules. Player 1 Signature (Electronic or Print):

Signed_____Dated_____

Club Representative_____Dated_____