Guest Name	Address
MinorName(s)_	
	Liability Release & Waiver
	elease and Waiver is an agreement between you, Judy Newman, and Daniel and Karen your use of the facility and participation in activities at 1692 Glen Canyon Santa
I,use the facilities children, my per	(Print your full name), in consideration of being permitted to in anyway, including without limitation use of the tennis court, do for myself, my sonal representatives, assignor , heirs, and next of kin hereby:
referred to as TR next of kin, for a as a result of Comy person or pro NEGLIGENCE	se, discharge, covenant not to sue and indemnify the Shea (all hereinafter collectively eleasees), from all liability to me, my personal representatives, assigns, heirs, family and my and all loss, damage, injury or illness (including but not limited to illness or sickness vid-19 (the Corona Virus) and any claim or demands therefore on account of injury to operty, including injuries resulting in my death, WHETHER CAUSED BY THE OF THE RELEASEES OR OTHERWISE, in any way arising out of or as a result of my des or participation in any activity.
INJURY, ILLNI OF COVID-19 (of the Releasees, any activities on activities and the activities. I furth discontinue furth expressly acknownot limited to terparalysis and dea Agreement (the maintenance of supervision, the any location on to be as broad ar held invalid, it is	URTHER EXPRESSLY ASSUME FULL RESPONSIBILITY FOR ANY BODILY ESS (INCLUDING BUT NOT LIMITED TO ILLNESS OR SICKNESS AS A RESULT THE CORONA VIRUS)), DEATH OR PROPERTY DAMAGE caused by the negligence, any third-parties or otherwise while using Shea⊡ facilities or participating in any way in the property. I expressly acknowledge and agree that I understand the nature of tennis at I am qualified, in good health and in proper physical condition to participate in those er agree and warrant that at any time I believe conditions to be unsafe I will immediately her participation in the activity or use of the facilities and report any concerns thereof. I wledge and agree that my use of the facilities and participation in activities, including but mis, involves risks and dangers of serious bodily injury, including permanent disability, ath. This Express Assumption of Risk Agreement and Release of Liability and Indemnity □Release□, includes, but is not limited to, claims based on the following: improper its equipment (mechanical or otherwise), grounds or facilities, negligent instruction or Guests□use of the facilities, equipment, and/or slipping or tripping anywhere in or about the property. I further expressly agreed that this Liability Release and Waiver is intended as inclusive as permitted by the laws of the state of California and that if any portion is agreed that the balance shall continue in full force and effect.
rights by signing intend it to be a definition Health Officer of in Place, including	g it and have signed it freely and without any inducement or assurance of any nature and complete and unconditional release of all liability. I agree to comply with the Order of the f the County of Santa Cruz dated March 31, 2020 and any updates in regard to Sheltering ng but not limited to the social distancing requirements set forth therein as well as any ns mandated by the Sheas.