



Dodgeball Registration Form

Participants Name - please print	Sex	Grade	DOB			Primary Phone		Alternate Phone
Address	City	State	Zip	Email Address				

RECREATIONAL SPORTS ASSUMPTION OF RISK, WAIVER AND RELEASE FROM LIABILITY

Please read this entire Recreational Sports Assumption of Risk, Waiver and Release from Liability (hereinafter "Release") carefully before signing. This is a legally binding agreement. By signing this Release, you give up the right to bring a court action or seek damages or other remedies for any injury to you, your child or your property. This includes injury or illness including, but not limited to, sprains, fractures, partial or total paralysis, death or other ailments that could cause serious disability however caused.

In consideration of being permitted to enter upon the property for any "open gym" purpose, including, but not limited to participation in any activity such as dodge ball, and all other activities of any nature, including the observation of such activities, the undersigned hereby agrees to the following:

I am aware that participation in activities of the nature described above are hazardous activities and that I or my minor child is voluntarily participating in these activities with knowledge of the danger involved and I hereby agree to accept and assume any and all risk of injury, both foreseeable and unforeseeable. I assume all risks that will arise out of such activity including the activity itself, the act of others, or the unavailability of emergency care. I am aware that adult supervision of such activities will be limited.

I agree to indemnify, defend, hold harmless and release Elkhorn Lacrosse Club, their elected and appointed directors, officers, agents, employees, and volunteers from any and all lawsuits, damages, claims, judgments, losses, liability or expense arising out of:

1. The death or personal injury or property damage to, myself, my child or my ward, which may be sustained while upon the property leased by or under the control of Elkhorn Lacrosse Club, Inc., or while participating in any activity upon such property of Elkhorn Lacrosse Club, including participation in activities as generally described above.
2. Any death or injury which results from any action taken to medically treat me, my child or my ward.

The above release and assumption of risk shall apply whether or not caused by the alleged negligence, whether active or passive, or any acts or omissions of Elkhorn Lacrosse Club, or any of their elected or appointed directors, officers, agents, employees or volunteers.

I also understand that Elkhorn Lacrosse Club, may not carry insurance to cover participants in the activities in which I, my child or my ward am/is participating. I understand that there are risks associated with these activities, and I assume the risk of any injuries that I, my child or my ward may sustain during any of these activities.

The undersigned, as a participant in the subject activities, or as a parent or guardian of a child participating in such activities, hereby consents to medical treatment in a medical emergency where the undersigned is unable to consent to such treatment.

I have read, understand and approve this Release. If the participant is a minor, the undersigned parent or legal guardian warrants and represents that this Release and its significance in the assumption of risk has been explained to and understood by my minor child or ward. I hereby declare, under penalty of perjury, that I am the parent or legal guardian of the named participant.

WAIVER IS VALID FOR 1 (ONE) CALENDAR YEAR FROM DATE SIGNED

Signature of Participant (if over the age of 18):

Signature of Parent/Guardian (if participant is a minor):

Signature	Date

Signature	Date

Printed Name

Printed Name