

## Beachin' with Beale – 1st Annual Mike Beale Memorial Pickleball Tournament Liability Waiver

**Participant Information** Name: \_\_\_\_\_

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

State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Acknowledgment of Risk and Waiver of Liability

In consideration of being allowed to participate in the Beachin' with Beale – 1st Annual Mike Beale Memorial Pickleball Tournament ("Event"), I, the undersigned participant, acknowledge, appreciate, and agree to the following:

1. **Voluntary Participation:** I am voluntarily participating in the Event and understand the risks involved in playing pickleball, including but not limited to the risk of physical injury or death, property damage, or other loss that may arise from participation in this sport.
2. **Assumption of Risk:** I knowingly and freely assume all risks, both known and unknown, even if arising from the negligence of the event organizers, sponsors, or others, and assume full responsibility for my participation.
3. **Release and Waiver:** I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release, indemnify, and hold harmless the Event organizers, sponsors, volunteers, and officials ("Releasees") from any and all claims, demands, losses, and liability arising out of or related to any injury, disability, death, or loss or damage to person or property incurred by me, whether caused by the negligence of the Releasees or otherwise, to the fullest extent permitted by law.
4. **Medical Treatment:** I consent to receive medical treatment deemed advisable in the event of injury, accident, or illness during the Event. I understand that I am solely responsible for all costs related to such medical treatment, medical transportation, and/or evacuation.
5. **Compliance with Rules:** I agree to comply with all rules, regulations, and instructions provided by the Event organizers. I understand that failure to comply may result in my disqualification from the Event and removal from the premises.
6. **Media Release:** I grant permission to the Event organizers to use photographs, videos, or other recordings of me for any legitimate purpose, including promotional materials, without compensation.
7. **Governing Law:** This waiver and release shall be governed by and construed in accordance with the laws of the state in which the Event is held.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

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

Parent/Guardian Signature (if participant is under 18): \_\_\_\_\_

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

**Emergency Contact Information** Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_