



## BBPC Pickleball Club Tournament Waiver and Release of Liability

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

**Phone Number:** \_\_\_\_\_

**Emergency Contact Name & Phone Number:** \_\_\_\_\_  
\_\_\_\_\_

I, the undersigned participant, acknowledge and agree to the following:

1. **Assumption of Risk:** I understand that participating in a pickleball tournament involves inherent risks, including but not limited to personal injury, property damage, or even death. I voluntarily assume full responsibility for any risks associated with my participation.
2. **Release of Liability:** I, on behalf of myself, my heirs, and assigns, release and hold harmless BBPC Pickleball Club, its tournament organizers, sponsors, facility owners, volunteers, and any associated parties from any and all liability for any injury, loss, or damage arising from my participation in this event.
3. **Medical Authorization:** In the event of an injury, I authorize tournament officials to obtain necessary medical treatment on my behalf. I understand that I am responsible for any medical expenses incurred.
4. **Fitness to Participate:** I certify that I am physically fit and have no known medical conditions that would prevent me from safely participating in this tournament.
5. **Media Release:** I grant permission for my likeness, voice, and performance to be used in photographs, videos, or other media for promotional purposes without compensation.
6. **Compliance with Rules:** I agree to abide by all tournament rules and conduct expectations set forth by BBPC Pickleball Club. Failure to do so may result in disqualification.

By signing below, I confirm that I have read, understood, and agreed to this waiver and release of liability.

**Participant Signature:** \_\_\_\_\_

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

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

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