

Recreational Sports Activity Waiver

Participant Information

Full Name:

Date of Birth:

Phone:

Email:

Emergency Contact:

Contact Phone:

Waiver of Liability

I, the undersigned, acknowledge that participation in recreational sports activities involves inherent risks, including but not limited to physical injuries, property damage, and other hazards. I voluntarily assume all such risks as a condition of my participation.

I hereby release, waive, and discharge Organization Name, its officers, employees, and

volunteers, from any and all liability arising from my participation in sports activities.

- I certify that I am physically fit to participate.
- I agree to comply with all rules and instructions.
- I understand this waiver is binding upon me, my heirs, and legal representatives.

Medical Authorization

In the event of an emergency, I authorize the staff to secure appropriate treatment as deemed necessary. I am responsible for all associated costs.

Signature

Participant Signature:

Date:

If under 18 years old:

Parent/Guardian Name:

Parent/Guardian Signature:

Date:
