

General Sports Participation Waiver Form

Please fill out the information below. By signing this form, you acknowledge the potential risks involved in sports activities and agree to the terms as outlined.

Participant Full Name

Date of Birth

Address

Emergency Contact Name

Emergency Contact Phone

Waiver and Release of Liability

I, the undersigned, understand and acknowledge that participating in sports involves inherent risks of injury, illness, and even death. I voluntarily accept and assume all such risks, known and unknown. I release, discharge, and hold harmless the organizers, coaches, staff, and facility from any and all liability for injury, loss, or damage to my person or property.

I further confirm that I am physically able and have no medical condition which would prevent my participation. In the event of an emergency, I authorize medical treatment as deemed necessary.

Participant Signature

Date

If participant is under 18, parent/guardian must sign below:

Parent/Guardian Signature

Date

