

Participant Sports Waiver Form

Participant Information

Full Name

Email

Phone Number

Date of Birth

Emergency Contact Name

Emergency Contact Phone

Waiver and Release of Liability

I, the undersigned participant, acknowledge and understand that participation in sports and physical activities involves inherent risks, including but not limited to the risk of serious injury or death.

I voluntarily and knowingly assume all such risks and hereby waive, release, and discharge the organizers, sponsors, officers, employees, volunteers, and agents from any liability for injury, loss, or damage to person or property arising out of or related to my participation.

I certify that I am physically fit to participate and have disclosed any relevant medical conditions. I agree to abide by all rules and safety instructions.

By signing below, I certify that I have read and understood this waiver and release of liability, and agree to its terms.

Participant Signature

Parent/Guardian Signature (if under 18)

Date
