



River John Pickleball Club

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY ("AGREEMENT")

Name of Participant: _____

IN CONSIDERATION of being permitted to participate In the Pickleball activity ("Activity") I, for myself, personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Pickleball Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that If at any time I believe conditions to be unsafe, I will Immediately discontinue further participation In the Activity.

2. FULLY UNDERSTAND THAT; (a) Pickleball Activities Involve risks and danger of serious bodily Injury, including permanent disability, paralysis, and death ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating In the Activity, the conditions in which the Activity takes place, or the Negligence of the "Releasees" names below; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time and I fully accept and assume all such risks and all responsibility for losses, costs and damages I incur as a result of my participation.

3. HERBY RELEASE, DISCHARGE, AND CONVENANT NOT TO SUE Pickleball Nova Scotia, their respective affiliates, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and If applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, ALCOHOL RELATED INJURIES, LOSSES, OR DAMAGES ON MY ACCONT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against the Releasees, I will INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE REALESEES from any litigation expenses, attorney fees, loss, liability, damage or cost which may incur as the result of such claim.

I HAVE READ THIS AGGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE COMPLETE AND UNCONDITIONAL RELEASES OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PROTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOT WITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

BY SIGNING BELOW, Participant accepts and agrees to the terms and provisions contained in this release and Waiver.

Participant Signature

Date

Email Address

Phone: () -

IF PARTICIPANT IS UNDER 19: I certify that I am the parent or legal guardian of the child named above. I confirm that I have read and understand the above consent and release and that I agree (on behalf of my child) to be bound by each of the above conditions.

Parent/Guardian Name

Parent/Guardian Signature

Date