



**BINGEMANS BEACH VOLLEYBALL LEAGUE RELEASE OF LIABILITY, WAIVER OF CLAIMS** By signing this document you will waive certain legal rights, including the right to sue. **PLEASE READ CAREFULLY**

I understand that participation in the Bingemans Inc. - Beach Volleyball League involves certain risks and dangers which are inherent to sport while training or competing and include but are not limited to death, serious neck and spinal injuries, head or eye injuries, serious injuries to virtually all bones, injuries or impairment to other aspects of my body, general health and well-being.

The preceding list is not inclusive and is meant solely to emphasize the level of risk and danger inherent in the sport of beach volleyball at any level of competition. I recognize the risk inherent in the game and hereby release Bingemans Inc. – Beach Volleyball League from any liability whatsoever arising out of or in connection with the Bingemans Inc. – Beach Volleyball League, including any liability due to the negligence of a breach of care of my contract of my participation involvement at Bingemans Inc.

I further acknowledge that I have read the above release and understand that I am relinquishing any and all rights that I, or any of my dependents, or my heirs, executors or administrators might have against Bingemans Inc. for any loss, damage, injury of expense suffered by me in connection with all activities associated with my participation in the Beach Volleyball League.

In consideration of being permitted to compete in Bingemans Inc. – Beach Volleyball League, I hereby release and forever discharge from any claim and liabilities whatsoever without limitation I might have against Bingemans Inc. in the Beach Volleyball League I am involved in, and make this release on behalf of my heirs, executors, administrators and assignors.

I HAVE READ THIS AGREEMENT AND UNDERSTAND IT. I AM AWARE THAT BY SIGNING THIS DOCUMENT I AM WAIVING CERTAIN RIGHTS WHICH I OR MY NEXT OF KIN, HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST BINGEMANS. I WARRANT THAT AT THE TIME OF SIGNING, I AM PHYSICALLY FIT TO PARTICIPATE.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

Team Name: \_\_\_\_\_

- |         |   |  |
|---------|---|--|
| League: | Sunday 4's Semi-Competitive<br>Sunday 6's Semi-Competitive<br>Monday 4's Semi-Competitive (630)<br>Monday 4's Semi-Competitive (830)<br>Tuesday 4's Competitive | Tuesday 4's Semi-Competitive<br>Wednesday 6's Semi-Competitive<br>Wednesday 6's Recreational<br>Thursday 4's Semi-Competitive<br>Thursday 6's Recreational |
|---------|---|--|

Applicant's Name (print clearly): \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

NOTE: If you are under the age of 18, you must provide the signature of your parent, guardian, or legal representative who will accept responsibility with you on your behalf for the agreements and understandings set out above.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_