

LAST NAME: _____

Important: Remember to sign the form below!!!



WAIVER AND RELEASE OF LIABILITY AND EXPRESS ASSUMPTION OF RISK

DISCLAIMER: NEITHER CAMBRIA PICKLEBALL BY THE SEA, INC. NOR ANY OF ITS DIRECTORS, OFFICERS, MEMBERS OR AGENTS IS RESPONSIBLE FOR ANY INJURY TO, OR ILLNESS OR LOSS OF OR DAMAGE TO PROPERTY OF, ANY PERSON IN CONNECTION WITH ANY PICKLEBALL EVENT OR OTHER EVENT, ACT OR ACTIVITY OF CAMBRIA PICKLEBALL BY THE SEA, INC., OR IN WHICH IT IS INVOLVED, FOR ANY REASON WHATSOEVER, INCLUDING BUT NOT LIMITED TO ORDINARY NEGLIGENCE ON THE PART OF CAMBRIA PICKLEBALL BY THE SEA OR ANY OF ITS DIRECTORS, OFFICERS, MEMBERS OR AGENTS.

In consideration of my involvement in one or more such events, acts or activities, I hereby forever release and discharge Cambria Pickleball by the Sea, Inc. and each of its directors, officers, members and agents from any and all present and future liability, claims, demands, actions and causes of actions whatsoever related to negligent or other acts or omissions by or any of them, and I covenant not to sue or otherwise make claim against any of them, for property damage or loss, personal injury, illness or death arising in connection with my involvement in any such event, act or activity, or any other activity or activities incidental thereto, wherever, whenever, or however the same may occur.

Further, I am aware that court play is a vigorous sporting activity and, as such, poses a risk of serious injury or death. I am voluntarily participating in this activity with knowledge of the risk involved and hereby agree to accept any and all inherent risks of property damage or loss, personal injury or death.

I understand that this waiver, release and assumption of risk are intended to be as broad and as inclusive as permitted by the laws of the State of California and agree that (i) if any portion is held invalid, the remainder will continue in full legal force and effect, and (ii) if any portion is held to be overly broad, it shall be narrowed to the extent necessary to continue in full legal force and effect. I further agree that the venue of any legal proceedings shall be within San Luis Obispo County, California.

This waiver, release and assumption of risk shall be binding on my representatives and heirs and shall inure to the benefit of any successor organization to Cambria Pickleball by the Sea, Inc., and successor's directors, officers, members and agents, and to the representatives and heirs of its and its successor organization's directors, officers, members and agents.

I affirm that I am of legal age and am freely signing this form. If I am signing as the parent or legal guardian of the participant, I consent to his or her involvement in such events, acts and activities. I have read this form and fully understand that, by signing it, I am giving up important legal rights and or remedies which may otherwise be available to me for the negligent or other acts of Cambria Pickleball by the Sea, Inc. or any other person listed above.

Print name of participant _____ Phone _____ Email (please) _____

Please Print Legibly

Home Town (please) _____

Signature of Participant if 18 years or older _____ Date _____

Signature of parent or legal guardian if participant is under 18 years of age _____ Date _____

In case of emergency who do you want us to call: _____

Phone Number: _____

Relationship _____