

Sport/Program: _____

Coaches & Team Captain Information (REQUIRED)

Team Name _____ Coach/Team Captain Name _____

Participants must be 18 years of age or older to play in any adult leagues.

Player Information

Last Name _____ First Name _____

Address _____ City _____ Zip

Phone _____ Date of Birth _____ Current Age _____ Male Female

Email Address _____

Parent/Guardian Information (REQUIRED FOR PARTICIPANTS UNDER THE AGE OF 18)

Parent/Guardian 1: Name _____ Phone _____

Parent/Guardian 2: Name _____ Phone _____

Emergency Contact Name _____ Emergency Contact Phone _____

Existing Medical Conditions

Does this participant have any disabilities, handicaps, present injuries or limitations, allergies, hemophilia, heart condition, history of respiratory illness or any other significant medical conditions? **Circle one: Yes No**

If yes, please state conditions: _____

Signatures Required

By signing below, you agree to the **RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")** on the reverse side of this form. If a participant is under the age of 18, a parent signature is required.

Participant's Signature _____ Date _____

Zero Tolerance Policy

Our goal at Rahll Activity Center is to provide a safe and enjoyable environment. Rahll Activity Center enforces a zero tolerance policy as it relates to any physical violence. Any act of physical violence OR unnecessary act of violent aggression on the part of a player, coach, or referee shall be grounds for permanent expulsion from our program. This policy also applies to any member of the Rahll Activity Center professional or contracted staff.

Release and Waiver of Liability, Assumption of Risk, and Indemnity and Parental Consent Agreement ("Agreement")

ALL LANGUAGE IN THIS DOCUMENT REFERS TO AN INDIVIDUAL "PARTICIPANT". IN THE CASE OF A MINOR UNDER THE AGE OF 18, "PARTICIPANT" REFERS TO THE PARENT OR LEGAL GUARDIAN FOR SAID INDIVIDUAL. PLEASE CHECK ONE OF THE FOLLOWING:

- I AM THE LEGAL PARENT/GUARDIAN FOR THIS PARTICIPANT WHO IS UNDER THE AGE OF 18
 I AM AN ADULT PARTICIPANT AGE 18 OR OLDER

NOTE: NO INDIVIDUAL WILL BE ALLOWED TO PARTICIPATE IN ANY RAHLL ACTIVITY CENTER ACTIVITY UNTIL THIS FORM IS ON FILE IN THE RAHLL ACTIVITY CENTER OFFICE. REGISTRATION FORMS ARE CONSIDERED NULL AND VOID UNTIL A VALID COPY OF THIS DOCUMENT IS IN PLACE. THE WAIVER ASSOCIATED WITH THIS ACCOUNT SHALL REMAIN IN EFFECT PERMANENTLY UNLESS THE PARTICIPANT NOTIFIES THE RAHLL ACTIVITY CENTER OFFICE, IN WRITING, THAT THEY NO LONGER WISH TO AGREE TO THE WAIVER. AT THAT POINT, THE PARTICIPANT WILL NEED TO MAKE AN APPOINTMENT TO MEET WITH RAHLL ACTIVITY CENTER OFFICIALS TO DISCUSS THE MATTER BEFORE BEING ALLOWED TO PARTICIPATE IN ANY FUTURE PROGRAMS.

IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN ANY WAY IN A RAHLL ACTIVITY CENTER ACTIVITY ("ACTIVITY") I, FOR MYSELF, FOR PERSONAL REPRESENTATIVES, ASSIGNS, HEIRS, AND NEXT OF KIN:

1. ACKNOWLEDGE, AGREE, AND REPRESENT THAT I UNDERSTAND THE NATURE OF RAHLL ACTIVITY CENTER 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) RAHLL ACTIVITY CENTER ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (B) THESE RISKS AND DANGERS MAY BE CAUSED BY MY OWN ACTIONS OR INACTION'S, THE ACTIONS OR INACTION'S OF OTHERS PARTICIPATING IN THE ACTIVITY, THE CONDITION IN WHICH THE ACTIVITY TAKES PLACE, OR THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (C) THERE MAY BE OTHER RISK 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. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE RAHLL ACTIVITY CENTER, THEIR RESPECTIVE ADMINISTRATORS, DIRECTORS, AGENTS, OFFICERS, MEMBERS, VOLUNTEERS, AND EMPLOYEES, OTHER PARTICIPANTS, ANY SPONSORS, ADVERTISERS, AND, IF APPLICABLE, OWNER AND LESSORS OF PREMISES ON WHICH THE ACTIVITY TAKES PLACE, (EACH CONSIDERED ONE OF THE "RELEASEES" HEREIN) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT 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 ANY OF THE RELEASEES, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS, LIABILITY, DAMAGE, OR COST WHICH MAY INCUR AS THE RESULT OF SUCH CLAIM.

PARTICIPANT RELEASE

AS THE PARTICIPANT, I UNDERSTAND THE NATURE OF RAHLL ACTIVITY CENTER ACTIVITIES AND MY EXPERIENCE AND CAPABILITIES. I BELIEVE TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY CLAIMS, DEMANDS, LOSSES, OR DAMAGES AS A PARTICIPANT, CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATION AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE PARTICIPANT, OR ANYONE ON MY BEHALF, MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

AGE AND/OR GRADE-BASED DISCREPANCIES

AT ANY TIME, AT THE SOLE DISCRETION OF RAHLL ACTIVITY CENTER, WE RESERVE THE RIGHT TO REQUIRE THE PARENT AND/OR LEGAL GUARDIAN TO SUBMIT AN ORIGINAL BIRTH CERTIFICATE, A CURRENT REPORT CARD, AND/OR A CURRENT SCHOOL-VALIDATED CLASS SCHEDULE TO VERIFY THE ACCURATE AGE/GRADE. FOR ADULT PARTICIPANTS, WE RESERVE THE RIGHT TO REQUIRE THE PARTICIPANT TO SUBMIT ONE OR MORE OF THE FOLLOWING VALID FORMS OF IDENTIFICATION: 1) DRIVER'S LICENSE FROM A U.S. STATE, 2) FEDERAL OR STATE ID CARD, 3) MILITARY ID CARD, 4) U.S. PASSPORT.

I HAVE READ THIS AGREEMENT, 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 A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

CODE OF CONDUCT

- THE CODE OF CONDUCT APPLIES TO PARTICIPANTS, COACHES/VOLUNTEERS, SPECTATORS, PARENTS, CONTRACTED EMPLOYEES, OFFICIALS, AND PROFESSIONAL STAFF
- PROFANE, OBSCENE, ABUSIVE, DEGRADING/THREATENING LANGUAGE, GESTURES AND/OR TAUNTING IN THE PRESENCE OF ANYONE ATTENDING A RAHLL ACTIVITY CENTER EVENT IS PROHIBITED.
- DO NOT HANDLE A CHILD/PARTICIPANT IN AN AGGRESSIVE OR ABUSIVE MANNER.
- ANY ACT OF VIOLENCE IS PROHIBITED.
- ACCEPT THE DECISION OF THE GAME OFFICIALS AS BEING FAIR AND CALLED TO THE BEST OF THEIR ABILITY.
- DO NOT KNOWINGLY PERMIT AN INELIGIBLE PLAYER TO PLAY IN ANY GAME.
- PLEASE USE GOOD SPORTSMANSHIP.
- THE USE OF DRUGS, ALCOHOL, VAPING, OR TOBACCO IN ANY FORM IS NOT PERMITTED WHILE ATTENDING ANY RAHLL ACTIVITY CENTER EVENT.
- NO FIREARMS OR WEAPONS WILL BE PERMITTED AT ANY RAHLL ACTIVITY CENTER EVENT.

AT ANY TIME, AT THE SOLE DISCRETION OF RAHLL ACTIVITY CENTER, VIOLATION OF THE CODE OF CONDUCT IS SUBJECT TO SUSPENSION OR EXPULSION FROM OUR PROGRAM.

STILL PHOTOGRAPHY AND VIDEO RELEASE

THE PARENT/GUARDIAN, OR ADULT PARTICIPANT SIGNATURE ON THIS FORM ALSO PERMITS RAHLL ACTIVITY CENTER TO USE STILL PHOTOGRAPHY AND/OR VIDEO ORIGINATING FROM OUR SPORTING EVENTS OR CONTRACTED AGENTS FOR PROMOTIONAL PURPOSES TO INCLUDE, BUT NOT LIMITED TO, TELEVISION AND VARIOUS FORMS OF VISUAL PRINT MEDIA.

SIGNATURE OF PARTICIPANT:

(PARENT/GUARDIAN SIGNATURE REQUIRED HERE IF PARTICIPANT IS UNDER THE AGE OF 18)

DATE: _____