

2nd Annual Pickleball Tournament

Wednesday 3/29: Women's Doubles

Thursday 3/30: Men's Doubles

Friday 3/31: Coed Doubles

Fee: \$27/person (\$15 for additional league)

9:30am—3:00pm

Team Check-in at 9:00am (each day)

Circle League:

Women's Doubles Men's Doubles Mixed Doubles

Circle Division:

Recreation (3.0 or below)
Intermediate (3.0—3.5)

Participant One

Name: _____

Address: _____

Email: _____

Phone: _____

T-Shirt: S M L XL XXL

Participant Two

Name: _____

Address: _____

Email: _____

Phone: _____

T-Shirt: S M L XL XXL

Registration Ends

3/24/17



**Payment Form on back—Must fill out to
Complete Registration**

Questions Contact:

Alaina Lofthus
(916) 483-7826

Alaina@carmichaelpark.com

Carmichael



ADULT PICKLEBALL TOURNAMENT

March 29th— 31st, 2017

Carmichael Recreation and Park District
5325 Engle Rd, Suite 100 Carmichael, CA 95608
Phone: 483-7826 Fax: 483-7861
www.carmichaelpark.com

Tournament Fee:

\$30 per person + \$15 for additional league

<u>Office Use Only:</u> Receipt Number:
--

Total Payment: \$ _____

Payment Type:

VISA: _____ MASTERCARD: _____ Check # _____ Cash _____

Credit Card Payments:

Acct. #: _____ Exp. Date: _____ Sec. Code: _____

Card Holder's Name: _____ Signature: _____

Card Holder's Address: _____ City: _____ Zip: _____

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the above district to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above district (its officers, officials, employees, and agents) from any and all liability arising out of, or connected in any way, with my participation in said activity even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or injury or property damage that I may sustain while participating in said activity.

PHOTO RELEASE: By signing this agreement, you are agreeing to release photo rights to Carmichael Recreation & Park District. Carmichael Recreation & Park District reserves the right to photograph facilities, activities, and program participants for potential future use. All photos will remain the property of Carmichael Recreation & Park District.

I have carefully read this Agreement, Waiver, and Release and fully understand its content. I am aware that this is a release of liability and a contract between myself and Carmichael Recreation & Park District and I sign it of my own free will.

Participant One:

Participant Two:

Print Name: _____

Print Name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____