P.G. Pickleball Club, Inc.
Membership and Waiver of Liability Form
Membership Year 2024

Please Print

Last Name: _____

First Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Main Location of Play: _____

Emergency Contact: _____

Contact's Phone Number: _____

Email: Be sure to print legibly! _____

Birthdate: (Month/Day) _____

WAIVER

I _____assume full responsibility for any bodily injury to myself as well as risk to my personal property. I further waive any liability and agree to indemnify and hold harmless the P.G. Pickleball Club officers and members from any damages and costs, including attorney's fees, which may arise from my participation in the club and its activities. I further agree that my name and any photos taken of me while in club activities may be used in publications of any social media, including but not limited to the newsletter and Facebook.

Club Responsibility

I, _____, acknowledge that as a club member I am expected to serve on duty at the entry desk, receiving entry fees from members and guests, at last once during the year. Free play granted on your day of duty.

Signature: _____ Date: _____