

**Lelia Patterson Center
Pickleball Registration form**

Dates of Play: August 6-9

Events: Women's doubles ____ Men's doubles ____ Mixed doubles ____ Singles ____

Entry Deadline: Entries must be received by August 6

Entry Fees: Entry Fee is \$10.00 for the first event and \$5.00 for each additional

Mail or hand deliver to: **Lelia Patterson Center**

111 Howard Gap Rd, Fletcher, NC 28732

Playing Location: Same

Format of Play: Round Robbin

Gender Female ____ Male ____

Name: _____
Last First middle initial

Address: _____
City State Zip

Phone #: _____ **Cell Phone #:** _____

Email Address: _____

Emergency Contact: _____ **Phone #:** _____

Enclose money with your Entry.

Please make checks payable to: Lelia Patterson Center

Name _____ Skill ability level Rating _____

Please circle events you want to participate in and provide partner information.

Women's doubles Partner will be _____

Men's doubles Partner will be _____

Mixed doubles Partner will be _____

Singles Yes ____ Level _____

Please make sure your listed partners have also competed and turned in registration forms with matching information.

Sign and date the waiver on the back of this page.

RELEASE, PERMISSION, AND INDEMNITY AGREEMENT

Waiver. In consideration of being permitted to participate in any way in the Lelia Patterson Pickleball Tournament (“the Tournament”), I, for myself, my heirs or assigns, **do hereby release, waive, discharge and covenant not to sue** [*name of entity sponsoring tournament and/or facility where the tournament is being held*], its/their officers, employees and agents from liability **from any and all claims** resulting in personal injuries, accidents or illnesses (including death) and property loss arising from my participation in the Tournament.

Assumption of Risk. Participation in the Tournament carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary, but include 1) minor injuries such as bruises, sprains and dehydration, 2) major injuries such as eye injuries, joint, bone or back injuries, heat stroke, heart attacks, and concussions, and 3) catastrophic injuries such as paralysis and death. **I have read the previous paragraphs and I know, understand and appreciate these and other risks that are inherent in playing pickleball. I assert that my participation is voluntary and that I knowingly assume all such risks.**

Indemnification and Hold Harmless. I also agree to indemnify and hold the LPC Tournament [*add others as desired*] harmless from any and all claims, actions, suits, costs, expenses, damages and liabilities, including attorney’s fees brought as a result of my involvement in the Tournament.

Signature of Participant

Print Name of Participant

Date

Signature of Parent/Guardian if Minor

Print Name of Minor’s Parent/Guardian

Date

Minor’s Age