



# ASSUMPTION OF RISK / WAIVER OF LIABILITY RELEASE / INDEMNIFICATION AGREEMENT (MINOR)

What you are about to read and are requested to sign is a waiver and release of liability. In enrolling at Cascade Indoor Sports LLC, (herein after referred to as CIS) the participant understands that attending the programs and using CIS and the facilities does so at his/her own risk.

### ADDITIONAL CONDITION TO BE SIGNED IF THE PARTICIPANT IS A MINOR

I represent that I am the parent or legal guardian of the named individual and hereby consent to their use of CIS facility and/or participation in CIS activities. In consideration of CIS allowing the above-named participant to participate and/or use the facility, I agree to be bound by the terms and conditions of this Release. On behalf of myself and my spouse or domestic partner, I hereby KNOWINGLY, INTENTIONALLY AND VOLUNTARILY WAIVE AND RELEASE, indemnify, hold harmless and forever discharge CIS, its officers, directors, instructors, employees, agents, members and guests and all others associated with CIS of and from any and all claims, demands, debts, contracts, expenses, causes of action, lawsuits, damage and liabilities, arising from or in any way related to such minor's participation in activities in connection with CIS. I further agree that I have full and sole responsibility for the safety and wellbeing of the above-named participant while he or she is using CIS facilities or participating in CIS related events.

Consent: I understand that Cascade Indoor Sports, LLC ("CIS") is furnishing only the opportunity to use an indoor athletic facility and hereby agree to release, indemnify and hold harmless CIS and all personnel, including, but not limited to, officials, staff, landlords, representatives and owners from any claim arising out of any injury, permanent injury or death to myself. I understand the rules of the game and facility, the hardness of the playing surfaces, dasher boards and tempered glass, the different and unique playing characteristics of artificial turf versus grass, and the roughness of the sport. I will play under control, within the rules of the game and to the best of my ability will avoid causing injury to myself and other persons using the facility. I grant CIS the right to video tape and/or photograph my participation in activities and to use the pictures in future brochures. I, in the event that I am injured, do hereby authorize treatment and/or care in ANY hospital and by ANY licensed medical doctor or dentist.

I further agree to indemnify, hold harmless and defend CIS, its officers, directors, instructors, employees, agents, members and guests and all others associated with CIS from and against any claims (including but not limited to negligence), loss, damage, liability, expense, costs, and/or attorneys' fees, including those brought by or on behalf of, or otherwise caused by the above-named participant. In addition, he/she agrees to follow the rules of conduct and play set by CIS. Failure to do so may result in suspension from participation. This waiver shall be effective until and unless revoked by parent/guardian or the named individual upon the attainment of 18 years of age.

Player's Name:

Male: \_\_\_\_\_ Female: \_\_\_\_\_ Childs Date of Birth: \_\_\_\_\_

Parents Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Primary #: \_\_\_\_\_ Secondary #: \_\_\_\_\_

E-Mail Address:

### IF THERE IS AN EMERGENCY PLEASE CONTACT:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Primary #: \_\_\_\_\_ Secondary #: \_\_\_\_\_

Allergies \_\_\_\_\_

Office Use Only: Player Card # \_\_\_\_\_ Date \_\_\_\_\_ Entered by \_\_\_\_\_