

**Social Sports of Bethesda, Co-Ed Volleyball, WINTER '08/'09  
REGISTRATION FORM**

NAME OF PARTICIPANT: \_\_\_\_\_ T-SHIRT SIZE: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_ GENDER: M F  
ADDRESS OF PARTICIPANT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
BIRTH DATE: \_\_\_\_\_ PHONE NO: \_\_\_\_\_  
EMERGENCY CONTACT: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_ TELEPHONE NO: \_\_\_\_\_  
HOW DID YOU HEAR ABOUT THE LEAGUE? \_\_\_\_\_ MILLER or LITE DIV. \_\_\_\_\_  
I HAVE READ AND UNDERSTAND THE RULES OF THE LEAGUE (PLEASE INITIAL): \_\_\_\_\_

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TEAM NAME: \_\_\_\_\_ OR PERSON YOU WANT TO BE ON A TEAM WITH: \_\_\_\_\_  
TEAM CAPTAIN: \_\_\_\_\_

**RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS  
AND INDEMNITY AGREEMENT**

**WARNING! BY SIGNING THIS FORM YOU GIVE UP IMPORTANT LEGAL RIGHTS  
INCLUDING THE RIGHT TO SUE. PLEASE READ CAREFULLY!**

DISCLAIMER CLAUSE

Social Sports, LLC, their officers, directors, agents, contractors, employees, volunteers, members and representatives (all hereafter collectively referred to as "the League") are not responsible for any injury, loss or damage of any kind sustained by any person while participating in Volleyball or any social event, including injury, loss or damage which might be caused by the negligence of the League.

RISKS

In consideration of my participation in Volleyball and any social event, I acknowledge that I am aware of the possible risks, dangers and hazards associated with my participation including the possible **risk of severe or fatal injury** to myself or others. I acknowledge it is my responsibility to obtain my own medical insurance.

INDEMNIFICATION

- In consideration of the League allowing me to voluntarily participate in the Volleyball season, I agree:
1. **TO ASSUME AND ACCEPT ALL RISKS** arising out of, associated with or related to my participating in Volleyball or any social event, even though such risks may have been caused by the negligence of the League;
  2. **TO BE SOLELY RESPONSIBLE FOR ANY INJURY, LOSS OR DAMAGE** which I might sustain participating in Volleyball or any social event, even though such injury, loss or damage may have been caused by the negligence of the League;
  3. **TO HOLD HARMLESS AND INDEMNIFY THE LEAGUE** from any and all liability for any damage to the property of, or personal injury to, any third party, resulting from my participation in Volleyball or any social event;
  4. **TO INDEMNIFY AND HOLD HARMLESS** the League, and each of its respective directors, officers, agents, contractors, employees, volunteers, members and representatives from any and all claims, demands, actions and costs which might arise out of my participating in Volleyball or any social event, even though such claims, demands, actions and costs may have been caused by the negligence of the League.

ACKNOWLEDGEMENT

**I UNDERSTAND THAT THIS IS A LEGAL AGREEMENT.** It is binding upon myself as well as upon my heirs, executors and representatives, in the event of my death or incapacity. **I HAVE READ AND UNDERSTOOD ALL THE TERMS OF THIS AGREEMENT**, and by signing this agreement voluntarily, I am agreeing to abide by these terms. I am entering this agreement with the understanding that I am accepting full responsibility for ANY injury that I might sustain by participating in this league. In addition, the information I have provided is accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date