

Hudson Valley Volleyball – Release Of Liability Agreement

Last Name	First Name	
Phone		
Street		
City	State	Zip
email		

In consideration of being allowed to participate in any Hudson Valley Volleyball event the undersigned acknowledges, appreciates and agrees that:

1 – The risk of injury from the activity involved is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist, and

2 - I knowingly and freely assume all such risks, both known and unknown, even if arising from negligence of the releasees or others and assume full responsibility for my participation: and I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation and bring such to the attention of the nearest official immediately; and

3 - I, for myself and on behalf of my heirs, assigns, personal representative and next of kin, hereby release and hold harmless Hudson Valley Volleyball, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), with respect to any and all injury, disability, death or loss or damage to person or property, whether arising from the negligence of the releasee or otherwise, to the fullest extent permitted by law.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Signature	Date
Emergency Contact	Phone
Age of Applicant if under 18	Parent or Guardian
ID #	Parent or Guardian Signature

RoofTime Wavier

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Name	Date
ID #	