Shannon Pohl Badminton Academy

First Name:	Las	st Name:	Cell Phone:
Date of Birth:	Age:	Gender:	School:
Mother's Name (if under 18):			Cell Phone:
Father's Name (if under 18):			Cell Phone:
Emergency Conta (if over 18):	act		Cell Phone:
Health Conditions Allergies:	5/		Current Medications:
Address:			City:
State:	Zip:		Home Phone:
Parent Email (if under 18):			Player Email:
☐ Group Class [☐ Private Lessons	☐ Open Gym	Group Class Level: (if applicable)
that I understand the nature of acknowledge that if I believe involves risks of serious bodil the event, Activity/Program, the either not known to me or not of my participation in the Activ I hereby release, discharge, a directors, agents, officers, vol Activity/Program takes place, be caused in whole or part by of liability, and assumption of any loss, liability, damage, or The parties agree that the suffagreement. The parties further Agreement, or any matter related agreement is declared illegal such conflict without affecting I have read the RELEASE AN signing it and have signed it find	of this Activity/Program and the event conditions are unsafe, in injury, including permanent ne conditions in which the event readily foreseeable at this tirrity/Program. In and covenant not to sue The sunteers, coaches, and employ (each considered one of the "Relearisk, I, or anyone on my behacost, which any may incur as the program of the state of er agree that any judicial processed hereto, shall be brought or invalid by a court or gener the remaining provisions of the ID WAIVER OF LIABILITY, Acreely and without any inducer wand agree that if any portion edate hereof.	at I am qualified, in good heal will immediately discontinue disability, paralysis and death ent, Activity/Program takes plane; and I fully accept and assume, and I fully accept and assume, other participants, any surface, other participants, and surface, other participants, and surface, other participants, and surface, other participants, and the result of such claim. Perrullinois shall govern all matters deeding brought against The Surface full in the courts of the State of Illial jurisdiction or is supersedential jurisdiction or is supersedential purisdiction or is supersedential purisdiction.	n Pohl Badminton Academy ("Activity/Program") and hereby represent lth, and in proper physical condition to participate in such Activity/Program. I participation in the Activity/Program. I fully understand that this Activity/Program, which may be caused by my own actions, or inactions, those of others participating in ace, or the negligence of the "releases" named below; and that there may be other risks under all such risks and all responsibility for losses, cost, and damages I incur as a result deemy, Adversity Volleyball Center, Shannon Pohl Mitchell, its respective administrators, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the all liability, claims, demands, losses, or damages, on my account caused or alleged to negligent rescue operations and in the future agree that if, despite this release, waiver of the Releasees, I will indemnify, save, and hold harmless, each of the Releasees from mission is also given to use my child's photo or endorsement for promotion. Is concerning the validity, performance, administration, and interpretation of this channon Pohl Badminton Academy on account of any dispute arising out of the inois or federal courts sitting in the State of Illinois. If any term, part, or provision of this d by a specific law or regulation, such law or regulation shall control to the extent of and obligations of the parties. INDEMNITY AGREEMENT, understand that I have given up substantial rights by are and intend it to be a complete and unconditional release of all liability to the be invalid the balance, notwithstanding, shall continue in full force and effect for a gnature of Participant
Date:			
of the above referenced Activ agree to all foregoing terms a HARMLESS each of the Rele a result of the Minor's particip despite the release, I, the Min	ities/Program and the Minor's nd conditions of this Agreeme assees from all liability, claims ation in the Activity/Program for or anyone in the Minor's b	s experience and capabilities a ent, I hereby release, discharge, demands, losses or damage or by the negligence of the Re ehalf makes a claim against a es, loss liability, damage, or co	the Participant, who is minor under 18 years of age ("Minor"), understand the nature and believe the Minor to be qualified to participate in such Activity/Program and hereby ge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD as on the Minor's account caused or alleged to have been caused in whole or in part as eleasees or otherwise, including negligent rescue operations, and further agree that if, any of the above Releasees, I WILL INDEMNIFY <save and="" any="" as="" claim.<="" each="" harmless="" hold="" incur="" may="" of="" ost="" releasee="" result="" such="" td="" the=""></save>



2099 S. State College Blvd, Suite 600, Anaheim, CA 92806

Email: Ryan.Berry@usabadminton.org Web: www.usabadminton.org

Phone: 714-765-2952

WAIVER AND RELEASE OF LIABILITY

Note: This form must be read and signed before the participant is permitted to take part in event sessions. By signing this agreement, the participant affirms having read it.

In consideration of my involvement at the _Shannon Pohl Badminton Academy_ under the auspices of USA Badminton and the Shannon Pohl Badminton Academy, I acknowlege, apprecaite, and agree that:

- 1. I risk bodily injury, including paralysis, dismemberment, disability, and death, and while particular rules of the sport, equipment, and discipline may reduce this risk, this risk of injury does exist, as well as the risk of damage to or loss of property.
- 2. I knowingly and freely assume all such risk; both known and unknown, even if arising from the negligence of the releases of others;
- 3. I willingly agree to comply with the state and customary terms and conditions for participation. If, however, I observe any unusual or unnecessary hazard during my presence or participation or if I observe any concern in my readiness for participation, I will immediately bring such to the attention of the nearest official and refrain from participation; and
- 3a. I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, herby release, hold harmless and promise not to sue USA Badminton, the committee, their sponsors, their officers, volunteers, staff, sponsors and/or agents, ("releasees") with respect to any and all injury and loss arising from my participation, whether caused by the negligence of the releasees, the condition of the premises or otherwise, except that which is the result of gross negligence or wanton misconduct, to the fullest extent permitted by law.
- 4. I agree to be bound by the rules and regulations of the Badminton World Federation and those of USA Badminton and I hereby stipulate that I am eligible to play in the events for which I am applying and that I understand that the above mentioned make no representation or warranty with respect to the condition of the premises or the operation of the event.
- 5. I hereby grant to USA Badminton, it's licensees and contractees including photographers, television and motion picture rights including to film or videotape me during matches, narratives, personal interviews, or comment thereon for any and all commercial, news or other purposes together with the right to transfer or grant their rights to others, all without remuneration or compensation to me whatsoever.

I have read this Release of Liability and Waiver Agreement, fully and unc substantial rights by signing it, and sign it freely and voluntarily without presence that I am aware that DRUG TESTING may occur at this event.				
Participant's Signature	Membership Number5254			
Participants Name (Printed)	Date			
For Participants of Minority Age This is to certify that I/We as parent(s)/ guardian(s) with legal responsibility for this participant, do consent and agree not only to his/her release, but also for myself, ourselves and my/our child involvement as stated above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.				
Parent(s)'s/ Guardian(s)'s Signature(s)	Date			
Participants Name (Printed)	Membership Number			

HOLD HARMLESS WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

USA Badminton and the Shannon Pohl Badminton Academy has put in place preventative measures to reduce the spread of COVID-19; however, USA Badminton and the Shannon Pohl Badminton Academy cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the Shannon Pohl Badminton Academy could increase your risk and your child(ren)'s risk of contracting COVID-19.

It is my intent as a participant or player at the Shannon Pohl Badminton Academy, while participating during activities including any pre-game or post-game activities that I am agreeable to the following:

I acknowledge that I am aware that there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for COVID-19 and/or any mutation or variation thereof;

IN CONSIDERATION OF HAVING THE OPPORTUNITY TO PARTICIPATE AT THE SHANNON POHL BADMINTON ACADEMY, AND IN ACKNOWLEDGING THAT I HAVE READ THIS HOLD HARMLESS WAIVER AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY, VOLUNTARILY, KNOWINGLY AND WILLINGLY WITHOUT ANY INDUCEMENT.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the Shannon Pohl Badminton Academy and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at Shannon Pohl Badminton Academy may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Shannon Pohl Badminton Academy employees, volunteers, and program participants and their families.

I hereby voluntarily agree to assume all of the foregoing risks, hold harmless, and indemnify USA Badminton and its trustees, agents, volunteers and employees from any and all claims, demands, damages and causes of action of any nature whatsoever arising out of ordinary negligence which I, my heirs, my assigns or successors may have against them for, on account of, or by reason of my participation in the above activities. I also accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at Shannon Pohl Badminton Academy ("Claims"). On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold harmless both USA Badminton and Shannon Pohl Badminton Academy, their employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of USA Badminton and/or Shannon Pohl Badminton Academy and its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation.

This Agreement shall be governed by, and construed in accorda	nce with, the laws of the State of Illinois.
Name of participant:	
Participant signature:	Date signed:
waiver/release to my child/ward including the risks of presence the rules and regulations for protection against communicable d risks and responsibilities. I for myself, my spouse, and child/wa indemnify and hold harmless USA Badminton and Shannon Pol	ility for this participant, have read and explained the provisions in this and participation and his/her personal responsibilities for adhering to iseases. Furthermore, my child/ward understands and accepts these rd do consent and agree to his/her release provided above and agree to hi Badminton Academy for any and all liabilities incident to my minor ovided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to
Parent guardian/signature:	Date signed: