



**Supreme Courts**  
**PARTICIPANT RELEASE OF**  
**LIABILITY**  
**READ BEFORE SIGNING**

Participant Name \_\_\_\_\_ Age \_\_\_\_\_

In consideration of being allowed to participate in any way in the program, related events and activities, I the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program 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 THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. 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, I will remove myself from participation and bring such to the attention of the nearest official immediately and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS KATY ELITE VOLLEYBALL and / or KATY ELITE VOLLEYBALL Directors, Association, 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 RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. Katy Elite Volleyball will not need to solicit prior consent from participants to post their images on katyelitevolleyball.com website, social media sites and promotional material.

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 AND INDUCEMENT.

\_\_\_\_\_  
Signature of Parent/Legal  
Guardian/Participant

\_\_\_\_\_  
Printed Name of Parent/Legal Guardian/Participant

\_\_\_\_\_  
Date

**Contact Information:**

\_\_\_\_\_  
Primary Phone

\_\_\_\_\_  
Mobile/Home Phone

\_\_\_\_\_  
E-Mail Address

**In the event of an emergency, if the above cannot be reached, please contact:**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Primary Phone