

ADULT REGISTRATION & RELEASE

INDIVIDUALS PLAY AT THEIR OWN RISK AND MUST CARRY THEIR OWN HEALTH INSURANCE COVERAGE!

***BY COMPLETING THE REGISTRATION BELOW, I HEREBY AGREE TO THE FOLLOWING:

In consideration of being allowed to participate in any way at the facilities owned and/or leased by NSPT Partners LLC d/b/a NorthSport Athletic Facility ("NorthSport"), its 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 skills, 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 as permitted by law, 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 the participation and bring such to the attention of NorthSport 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 NORTHSPORT PARTIES, their officers, officials, agents, representatives and/or employees, other participants, sponsoring agencies, sponsors, advertisers, owners and lessees of premises used for the activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person and property, or claims or suits for such loss or damage and all expenses related to such loss or damage (including attorneys' fees), WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASES OR OTHERWISE, to the fullest extent permitted by law. The release herein shall be binding on my personal representatives and heirs. In addition, I agree to allow NorthSport to use any photographs or videos taken at the facility for purpose of publicity. 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 AND NOT UNDER DURESS.

REQUIRED INFORMATION

PARTICIPANT NAME		GENDER		
DRESS		CITY		
STATE	ZIP	D.O.B	AGE	
EMAIL ADDRESS		PHONE		
PARTICIPANT SIGNATURE			DATE	_
COMPLETE WHERE APPLICABLE	≣			
ACTIVITY/SPORT ATTENDING				_
TEAM NAME		LEAGUE		
NOTES				