

Hudson Valley Volleyball
6 Delaware Road, Newburgh, NY 12550
Release Of Liability Agreement
(please print legibly)

First _____

Last _____

Phone _____

email _____

Street _____

City _____

State _____

Zip _____

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 risk, the risk of serious injury does exist; and
2. 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; and
3. 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 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.

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

Participant Signature _____

Date _____

Emergency Contact _____

Phone _____

Age if under 18 _____

Parent or Guardian (print) _____

Parent or Guardian Signature _____