SpikeSport Volleyball League

AMATEUR ADULT ATHLETIC WAIVER
AND RELEASE OF LIABILITY
FOR SPIKESPORT VOLLEYBALL
AND RUSS LUKAS (Lukasiuk)

*** Team name _____

SpikeSport / Belmar Beach Volleyball League 2010
3rd & Ocean Avenue, Belmar, NJ

I hereby agree to participate as a team member in the sport and league designated above.

I understand that there are certain risks of injury inherent in the practice and play of this sport and league, as well as in traveling and other related activities incidental to my participation, and I am willing to assume these risks. I hereby certify that I am fully capable of participating in the designated sport and that I am healthy and have no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as listed below.

In addition to giving full consent for my participation, I do hereby waive, release and hold harmless the organization named below, Russell Lukasiuk (Lukas), SpikeSport Volleyball, its officers, coaches, referees, sponsors, supervisors and representatives and the Boro Of Belmar for any accident or injury that may be suffered by me in the normal course of participation / traveling to or from the site in the designated sport and league and the activities incidental thereto, whether the result of negligence on anyone's part or any other cause.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

_____ _____ _____ _____
Name of Participant (please print) **Age** **Date of Birth** **Phone Number**

_____ _____ _____ _____
Street Address **City/Town** **State** **Zip Code**

_____
Please List any physical limitation (allergies, hearing, sight, etc.)

_____ _____
Participant's Signature **Date**

_____
E-mail

SpikeSport Volleyball Promotions **Russ Lukasiuk** **Volleyball**
Name of Sponsoring Organization **(Russ Lukas)** **Designated Sport**