



Player Release

IN consideration of being allowed to participate in any way in EMERALD CITY NETBALL CLUB training, leagues, tournaments, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1) The risk of potential 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 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 and hold harmless**, EMERALD CITY NETBALL CLUB, their officers, 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**; and

5) I understand that as a member of EMERALD CITY NETBALL CLUB or that by attending any EMERALD CITY NETBALL CLUB program, I consent to the use of photographs / film / videotapes / electronic representations and/or sound recordings made of me during that time by EMERALD CITY NETBALL CLUB at their discretion, and I hereby release EMERALD CITY NETBALL CLUB from any and all liability from such use and publication.

I HAVE READ THIS RELEASE, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

This **release** may not be changed.

Participant's signature _____

Participant's Name _____ Date signed: _____

I have my own Health Insurance –

YES

NO