



<b>Date:</b>	<b>Location:</b>
<b>Participant(s):</b>	
<b>Address:</b>	
<b>Email:</b>	

In consideration for being permitted by Knockerball North Conway to participate in any and all activities performed by Knockerball North Conway at their facility located at 50 White Mountain Highway, Conway, NH 03813, or at a separate location, including, but not limited to bubble ball soccer, archery tag, flag football, soccer, baseball, lacrosse, field hockey, and/or any other sports I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activities. This release is intended to discharge in advance Knockerball North Conway (its officers, employees and agents) from any and all liability arising out of or connected in any way with my participation in said activities, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that these activities involve an element of risk and danger of accidents and knowing those risks, I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activities.

I hereby additionally consent that I will participate in activities performed by or with Knockerball North Conway including, but not limited to, bubble ball soccer, archery tag, flag football, soccer, baseball, lacrosse, field hockey, and/or any other sports, and I hereby execute the above AGREEMENT, WAIVER, AND RELEASE. I state that I am physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense, which they may incur as a result of the death or any injury or property damage, that I may sustain while participating in said activities.

**I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN KNOCKERBALL NORTH CONWAY AND MYSELF. I SIGN IT OF MY FREE WILL. I FURTHER UNDERSTAND THAT NO MEDICAL INSURANCE IS PROVIDED.**

Parent(s) or court-appointed legal guardian(s) must sign for any participating minor (those under 18 years of age) and agree that they and the minor are subject to all the terms of this document, as set forth above.

If signing for a minor, name of Legal Guardian: \_\_\_\_\_

Emergency Contact(s): \_\_\_\_\_

Emergency Contact(s) Phone #: \_\_\_\_\_

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