

The Quad Cities Pickleball Club

invites QC youth to the 4th annual

Youth Pickleball Clinic

Aug 13-15, 2018

Who: Youth ages 10-16 (play with your own age group)
For beginners and those who already play

What: 3-day youth pickleball clinic and play with
round robin games on Wednesday

When: Mon-Wed, Aug 13-15, 2018 (rain dates Aug 16,17)
10:30 am - 12:00 pm Check-in at 10:15 am

Where: Bettendorf Middle School Pickleball Courts
2030 Middle Road, Bettendorf, Iowa

Participant fee: \$5

Equipment provided.

Bring a water bottle and wear athletic shoes.

Participants eligible for prize drawings!

Registration form available online at qcpickleball.wordpress.com

All entries **MUST** be received by Saturday, Aug 11, 2018

Space is limited so sign up soon! Questions?

rsenneff@mchsi.com or 563-508-5847

**Registration and Waiver for Youth Clinic (ages 10-16),
Aug 13-15, 2018, 10:30 am - 12:00, at Bettendorf Middle School courts**

Fill in the information below and read/sign the attached waiver. **Mail to the address at the bottom of this page.**

Name _____ Age _____

Have you played pickleball before? _____ Okay to be in group pic? _____

Address, City, State _____

Parent email _____ Phone _____

Emergency Contact _____ Phone _____

Parent/Guardian Signature _____

Waiver, Consent and Release of Liability

WARNING: READ CAREFULLY. THIS AGREEMENT INCLUDES A RELEASE OF LIABILITY AND WAIVER OF LEGAL RIGHTS AND DEPRIVES YOU OF THE RIGHT TO SUE THIS ORGANIZATION AND OTHER PARTIES. DO NOT SIGN THIS AGREEMENT UNLESS YOU HAVE READ IT IN ITS ENTIRETY. SEEK THE ADVICE OF LEGAL COUNSEL IF YOU ARE UNSURE OF ITS EFFECT.

Admission of Risk and Liability Release: In submitting this application, I acknowledge that I am assuming risks, and agreeing to indemnify, not to sue and release from liability Quad Cities Pickleball Club (QCPC) its officers, board of directors, members and volunteers, in the case of any accident, injury, or damage of any kind. I recognize that playing pickleball is potentially dangerous, and I represent that I am a competent player with safe equipment. I understand that I participate in club activities at my own risk. I further recognize that safety is my personal responsibility and I agree to participate in keeping all QCPC activities safe as possible. I agree to hold the club harmless and indemnify the club for all costs, judgments and awards that may be claimed including the cost to defend such claims brought by you or another in your behalf or that of others.

FOR MINORS: Parent or Guardian must agree to this waiver:

I am the parent or guardian of the above listed applicant, and assure QCPC that the facts and responsibilities listed above concerning my child or ward are true. By signing this form I am giving my permission for my child or ward to participate in QCPC events and activities. I agree to the terms of the above listed Admission of Risk and Liability Release whose terms bind me, my child, my heirs, legal representatives and assignees.

If you are older than thirteen, but not yet eighteen or you are incapacitated and/or mentally challenged, please have a parent or legal guardian note their acceptance of the terms of registration by providing their initials where indicated below. If you are at least eighteen, please enter your own initials where indicated below. I understand that this Waiver and Release may be stored electronically and agree that a copy is authentic and admissible as evidence in any future dispute or proceedings. I have read, understood, and accept the agreement above. My submission of this form shall act as my legal signature.

Initials of: _____ registrant if over 18 years of age; or parent/legal guardian of minor, incapacitated, or mentally challenged person.

Liability Release - Signature Required

Individual (self) _____ Date _____

Parent/Guardian for Child < 18 _____ Date _____

Make checks payable to QCPC. Mail registration to: Youth Pickleball, 5328 Taylor Ave, Bettendorf, IA. 52722. Registrations must be received by Saturday, Aug 11, 2018.