REQUIRED FOR ALL ADULT MEMBERS AND PARTICIPANTS IN FPUSA CLUB ACTIVITIES

ACCIDENT WAIVER AND RELEASE OF LIABILITY

Insured: **Member Clubs & Events of the Federation of Petanque USA**

Sport Activity: **Pétanque**

I acknowledge that this sport is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. These risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event and lack of hydration. These risks are not only inherent in athletics, but are also present for volunteers.

I hereby assume all of the risks of participating and or volunteering in this sport's events.

I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise by a qualified person.

I acknowledge that this Accident Waiver and Release of Liability form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and responsibilities at said events.

In consideration of my application and permitting me to participate in this sport, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: To waive, release, and discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me including my traveling to and from events, the following entities or persons: **Federation of Petanque USA, its Member Clubs, and Sanctioned Events**

I hereby consent to receive medical treatment which may be deemed advisable in event of injury, accident and or illness during this event.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and assigns.

The Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document and understand its content.

Participant's Name (Printed)	Signature	Date Signed

Street Address	Email Address

Contact Phone	Date of Birth

FPUSA MEMBER CLUB: Eugene Pétanque International Club (EPIC)

PARTICIPANT ACCIDENT WAIVER & RELEASE OF LIABILITY

(Original to be sent to the FPUSA Secretary and a copy kept for club's files.)