

TRVPC Membership Form

Name: First _____ Last _____

Email: _____

Address: _____

Phone: _____

Skill Level: _____ See the "Player Rating Page"

Emergency Contact _____ Ph. _____

Dues paid yearly are \$20/person. Dues may be paid on a monthly basis at \$2/person/month.

We like to list our members and their phone numbers on our website. Please check below how you would like us to handle your name and phone number.

- You may list my name and phone number.
- Do not list my name and phone number.

Sign waiver on the second page and Make checks out to: TRVPC

Mail check and completed form to our club treasure:

Janet Dalen (Treasure)
419 Arlington Drive
Rio Vista, CA 94571-2190

Or

Give to a club officer on the court.

Comments:

Liability Release -Trilogy @ Rio Vista Pickleball Club

Every reference to the TRVPC in this document shall be deemed to include the Trilogy @ Rio Vista Pickleball Club, its groups, officers, employees, members, leaders, instructors, contractors, volunteers, and agents of any kind. By signing this release of liability, I am waiving and giving up forever the right to sue the TRVPC in any federal or state court. I also waive and give up forever the right to seek or compel arbitration of any claim I may have against the TRVPC. I agree that I will not sue, or otherwise make any claim against the TRVPC for death, injury, loss, or damage, to person or property, resulting from the negligence of, or other acts by, however caused, any officer, employee, member, leader, instructor, contractor, volunteer, or agent of any kind, of the Trilogy @ Rio Vista Pickleball Club or its groups, as a result of my participation in any Pickleball event of the Trilogy @ Rio Vista Pickleball Club or its groups. I also agree that I will not sue, or otherwise make any claim against the TRVPC for any injury or loss I may incur, including death while traveling to or from any activity of the TRILOGY @ RIO VISTA PICKLEBALL CLUB . I also agree to release and discharge the TRVPC from all actions, claims or demands for myself, my heirs, personal representative, child or ward, next of kin, spouse, and assigns for death, injury, loss or damage to person or property, resulting from my participation in any TRVPC activity or event - including traveling to and from such activity or event. The terms of this release shall also be binding as to any other persons, or members of my family, including and minors, which may accompany me. I hereby warrant that I have the authority to release and discharge the TRVPC for myself and others as set forth herein. In the event any person, including but not limited to a signatory to this agreement or anyone acting in his or her place, or any entity, including but not limited to any insurance company or health care provider, sues the TRVPC for damages or other legal or equitable relief for any form of indemnity in any court or before any arbitrator, arising out of my participation in any activities of the TRVPC or its groups, I promise to reimburse the TRVPC for all of the cost of the legal defense including, but not limited to, attorney fees, court fees, deposition costs, postage, photocopy expenses, as well as messenger, telephone, and facsimile transmission cost. Further, I agree to indemnify the TRVPC in the amount of any settlement, judgment, or any other form of award including, but not limited to, arbitrator's award imposed against them, arising out of or in any way connected to my participation in activities of the Trilogy @ Rio Vista Pickleball Club or its groups, including traveling to and from such activities. I agree to the terms of this release of liability with the understanding that the Trilogy @ Rio Vista Pickleball Club does not require of or provide to its groups, officers, employees, members, leaders, instructors, contractors, volunteers, or agents, any training of any kind whatsoever, including first aid training,. I agree that this release of liability will be governed by the law of the State of California and is intended to be as broad and inclusive as is permitted by California law. In any event any portion of this release of liability is determined to be invalid, illegal, or unenforceable, the validity, legality, and enforceability of the balance of this release of liability shall not be affected or impaired in any way and shall continue in full legal force and effect. I am over the age of eighteen years and/or my legal guardian has also read and signed this release of liability as well as the "Signature of Legal Guardian" form (a separate document). I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A PROMISE NOT TO SUE, A RELEASE OF LIABILITY, AND A CONTRACT OF INDEMNITY BETWEEN THE TRILOGY @ RIO VISTA PICKLEBALL CLUB AND MYSELF AND I SIGN IT OF MY OWN FREE WILL.

Signed _____ Date _____