



**Waiver Form**

I, \_\_\_\_\_, know and understand that there are inherent risks to participating in Grimsby Smash. I also know and understand that Grimsby Smash, conveners, referees and the facility in which I play can NOT be held responsible for any injuries I may incur while on site and/or participating in Grimsby Smash drop-in dodgeball. I also understand that the league, conveners, referees and facility are not responsible for any lost, stolen, or damaged belongings.

In addition, I have read and understood the rules of play for Grimsby Smash and have agreed to adhere to them. I fully understand that any unsportsmanlike behaviour on my part as deemed by the league conveners or referees (i.e. verbal abuse, physical abuse, violence on or off court) can result in my and/or my team’s immediate ejection from the game without refund. I am also aware that smoking, alcohol, vaping and illegal or legal drugs are strictly prohibited on all property. Failure to adhere to these rules can result in my immediate ejection from the game without refund.

I hereby give Grimsby Smash, its assignees, licensees, and legal representatives the irrevocable right to use my name/photograph/image/audio recordings/video recordings/ and likeness in all forms and manner including but not limited to publication on Internet Web Sites, broadcasts and any other publications as released to or by Grimsby Smash. I understand that Grimsby Smash cannot control unauthorized use of my image by persons not associated with Grimsby Smash once my image has been published. I hereby forever waive any right to inspect or approve any publication of my image by Grimsby Smash.

I have carefully reviewed and understand the above provisions and agree to be bound by them. I voluntarily and irrevocably give my consent and agree to this Release and Waiver.

**Participant Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

*(Signature of Parent or Guardian if Participant is under the age of 18)*

**ADMINISTRATION ONLY**

**PAYMENT COLLECTED**  **VISITOR SELF-ASSESSMENT COMPLETE**

**INITIALS** \_\_\_\_\_ **TIME** \_\_\_\_\_