

CT Sports Center Waiver, Release & Rules

Winter 2009

This form must be signed before any participant is allowed to take part in any training, competition, meeting or sessions. By signing this form, the participants affirm having read it.

1. I risk bodily injury including paralysis, dismemberment and death, as well as loss or damage or property;
2. I knowingly and freely assume all risk of injury and acknowledge that my insurance alone will cover any and all injuries
3. I for myself, and behalf of my heirs, assigns and next of kin, hereby release, hold harmless and promise not to sue the Connecticut Sports Center, LLC, its owners, employees and sponsors with respect to any and all such injury, paralysis, dismemberment, death, and/or loss or damage to property except that which is the result of gross negligence and/or willful misconduct by the CT Sports Center, LLC.

The waiver must be signed and returned as soon as possible. Players who do not return their waivers may not be allowed to participate.

Rules

- There will be absolutely **NO** fighting, foul language, physical or verbal abuse, or disparaging remarks allowed, direct towards other participants, spectators or referees. ALL participants and spectators must show courteous sportsmanship. Violators will be immediately expelled from the facility and/or future events without refunds. All participants are to abide by state laws and regulations.
- **Gum chewing is not permitted on the Turf.**
- **No Food or Drink on the Turf.**
- The CT Sports Center reserves the right to decide on final judgments. All decisions are up to the discretion of the CT Sports Center management and staff.

I have read and understand the rules, procedures and protocol provided by the Connecticut Sports Center, LLC.

This page is to be filled out completely and returned to the CT Sports Center front desk BEFORE your team is able to play. Any players added to your team MUST check in at the front desk, complete and sign this form before playing.

PLEASE FILL OUT ALL INFORMATION REQUESTED & SIGN NAME

Team Name: _____ Number of Players: _____

Captain/Team Contact

Name: _____ Signature: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alt. Phone: _____ Date: _____

E-mail (optional): _____

All other players please fill out the back of this form

Name: _____ Signature: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alt. Phone: _____ Date: _____

E-mail (optional): _____

Name: _____ Signature: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alt. Phone: _____ Date: _____

E-mail (optional): _____

Name: _____ Signature: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alt. Phone: _____ Date: _____

E-mail (optional): _____

Name: _____ Signature: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alt. Phone: _____ Date: _____

E-mail (optional): _____

Name: _____ Signature: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alt. Phone: _____ Date: _____

E-mail (optional): _____

Name: _____ Signature: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alt. Phone: _____ Date: _____

E-mail (optional): _____

Name: _____ Signature: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alt. Phone: _____ Date: _____

E-mail (optional): _____