



USA BADMINTON WAIVER AND RELEASE OF LIABILITY

Note: This form must be read and signed before the participant is permitted to take part in event sessions. By signing this agreement, the participant affirms having read it.

In consideration of my involvement at the **TO Badminton Organization** under the auspices of USA Badminton and **TO Badminton Organization**, I acknowledge, appreciate, and agree that:

1. I risk bodily injury, including paralysis, dismemberment, disability, and death, and while particular rules of the sport, equipment, and discipline may reduce this risk, this risk of injury does exist, as well as the risk of damage to or loss of property.
2. I knowingly and freely assume all such risk; both known and unknown, even if arising from the negligence of the releasees or others;
3. I willingly agree to comply with the customary terms and conditions for participation. If, however, I observe any unusual or unnecessary hazard during my presence or participation or if I observe any concern in my readiness for participation, I will immediately bring such to the attention of the nearest official and refrain from participation; and
- 3a. I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, hold harmless and promise not to sue USA Badminton, the committee, their respective sponsors, or the respective officers, directors, volunteers, staff, sponsors and/or agents of any of them (collectively, the "releasees") with respect to any and all injury and loss arising from my participation, whether caused by the negligence of the releasees, the condition of the premises or otherwise, except that which is the result of gross negligence or wanton misconduct, to the fullest extent permitted by law. I give permission for emergency medical treatment to be administered as deemed appropriate. Included within the release above, I release and forever discharge the releasees from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with my participation.
4. I agree to be bound by the rules and regulations of the Badminton World Federation and those of USA Badminton and I hereby stipulate that I am eligible to play in the events for which I am applying and that I understand that the above mentioned make no representation or warranty with respect to the condition of the premises or the operation of the event.
5. I hereby grant to USA Badminton, its licensees and contractors, including photographers, all right, title and interest in and to any and all photographic images and video or audio recordings of whatever kind or type in any medium, made by or for USA Badminton during the event, including the right to film or videotape me during matches, narratives or personal interviews, or the right to comment thereon for any and all commercial, news or other purposes, together with the right to transfer or grant such rights to others, and to all royalties, proceeds and/or other benefits derived from such photographs and recordings, all without remuneration or compensation to me whatsoever.

I have read this Release of Liability and Waiver Agreement, fully and understand the terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement. And I further acknowledge by their presence that I am aware that DRUG TESTING may occur at this event.

Participant's Signature _____ Date of Signature _____

Participants Name (Printed) _____ USAB Membership Number # _____ USAB Membership Expiration date _____

For Participants of Minority Age

This is to certify that I/We as parent(s)/ guardian(s) with legal responsibility for this participant, do consent and agree not only to his/her release, but also for myself, ourselves and my/our child involvement as stated above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent(s)/ Guardian(s)'s Signature(s)

Date of Signature

Participants Name (Printed)

USAB Membership Number #

USAB Membership Expiration date