

Liability Waiver

Date: _____

Sports Performance Park & its agents will take all	actions to reduce the element of
personal loss or risk. However, every athletic a element of risk. As a participant you agree that	
own risk participating in the activities of the pr	
Performance Park. You also agree that you are a possibility of death, damage, and loss to you a	
result from being a participant, including, witho personal property. You also waive and release	•
have and the right to bring any action against Sp	orts Performance Park, their staff
and agents arising from any injury, accident acknowledge that you have carefully read th	
Document and that by signing below, you fully	-
participant is under eighteen years of age, the passigning the consent form below gives permiss	
activities based on the terms set forth within this	liability waiver and contract.
Guardian must sign if member is under 18 years of age	
Player Name:	
Phone Number:	DOB:
Address:	
Email:	
Signature:	

Guardian Name: _____