

**STATEMENT OF RISK**

"ULTIMATE" or "ULTIMATE FRISBEE" is a non-contact athletic sport/game with inherent risks, as any physical or athletic activity has. Any player and/or non-participant attending or active in playing "Ultimate" in an informal or formal practices, pick up, leagues or tournaments sponsored by BlueREY assumes every and all risks inherent or accidental to such participation or non-participation. BlueREY strongly recommends players obtain their own medical insurance coverage as BlueREY is not liable nor carries insurance for injury or illness. Risks can include injuries of any nature, including but not limited to sprains, cramps, abrasions, muscle, ligament, or tendon injury, broken bones, injury to organs, or any injury to any part of the body, and the extent of degree of such injury. In addition, dizziness, convulsion, concussion, exhaustion, fatigue, fainting, and any illness or bodily malfunction resulting from participation in this activity can occur. Accidental or incidental injury can occur, as could a disabling injury or death.

**RELEASE**

KNOWN ALL MEN BY THESE PRESENTS that the undersigned, by attending and/or participating in the BlueREY practices, pick up, tournaments, leagues and events and in using City of Rochester, County of Monroe, Town of Brighton, Webster, Henrietta or any other public or private fields and any equipment supplied, recognizes that there are dangers inherent to this activity and further agrees to assume the risk incidental to the games, either as a participant or observer, as well as the hazards associated with the use of a flying disc and field of play under those circumstances, including the acts of any other person in said league, on or near the fields used to play such a game. The undersigned further agrees to assume full responsibility for any injuries or damages to him/herself or his/her property that may occur from playing or participating in said BlueREY event. In understanding the physical requirements involved, the undersigned further expresses to be in good physical condition and professes to have no known ailments, injuries, or other medical problems that would preclude the undersigned from safely playing or participating in said BlueREY event. The undersigned also agrees to assume full responsibility and liability for any injuries or damages to others or their property caused by the undersigned, which result from playing or participating in said BlueREY event.

The undersigned, with the intention of binding him/herself, his/her heirs, executors, administrators and assigns, to hereby expressly release, discharge and hold harmless BlueREY, its directors, officers, employees, agents, representatives, members, affiliates, successors and assigns from all claims, demands, actions, judgments and executions which the undersigned ever had, now has or may have, or which the undersigned's heirs, executors, administrators or assigns may have or claim to have against the BlueREY, or its director, officers, agents, representatives, members, affiliates, successors and assigns, created by or arising out of the undersigned's participation in or attendance at BlueREY events, and any and all activities related or incidental thereto, in any manner whatsoever, and from all personal injuries and/or property damage, known or unknown, suffered by the undersigned or a member of the family or guest of the undersigned.

The undersigned understands that the facts on which the foregoing release is based may hereafter turn out to be other than or different from the facts in that connection now known by the undersigned, or believed by the undersigned to be true. The undersigned expressly accepts and assumes the risk of the facts turning out to be different, and the undersigned agrees that the foregoing release shall be in all respects effective and not subject to termination, revision, or modification by reason of any such difference in facts.

ALL PARTICIPANT'S MUST COMPLETE THE FOLLOWING INFORMATION AND HAVE THE REQUIRED SIGNATURES IN ORDER TO PARTICIPATE. NO EXCEPTIONS.

Participant's Printed Name: \_\_\_\_\_ Participant's Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ (If under 18, signature of Parent/Legal Guardian is REQUIRED)

Printed Name of Parent/Legal Guardian: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Participant's Cell phone #: \_\_\_\_\_

Parent's Cell phones/s: (for emergency contact) \_\_\_\_\_

Participant's Email: \_\_\_\_\_ (PRINT LEGIBLY!!!)