

PORT PERRY LAWN BOWLING CLUB
20__ CLUB REGISTRATION

Please complete and return this form, as soon as possible. You can bring this to our Spring Meeting, give to a member of the Executive, drop it off at Bill's store or mail to:
Port Perry Lawn Bowling Club, 16077 Old Simcoe Road, Port Perry, ON L9L 1P3

Last Name: _____ First Name: _____
Mailing Address: _____
City: _____ Postal Code: _____
Phone: _____ E-Mail Address: _____
Signature: _____ Date: _____

**In signing this registration form, you are agreeing to the waiver for liability (Acknowledgement of Risk and Release of Liability) as attached.*

**Also, by signing this registration you agree that your image may be used in promoting Club activities, promotional materials, newspapers, web sites, our photo wall, etc.*

FEES: (Due at time of registration) for the Lawn Bowling Season:

Adult: \$ 150.00
Adult First Year: \$ 75.00 (includes usage of Club Bowls)
Social/Junior(21 and Under): \$ 25.00 (Cannot play in District Tournaments)
Club Bowls Rental: \$ 15.00 for the Season (First Come – First Choice)

LEAGUES:

Tuesday evening: League Triples Thursday evening: League Pairs
Wednesday morning: Casual game / coaching and practice

VOLUNTEER DUTIES:

Please remember, this is a Volunteer organization and all members are expected to assist in the running of the Club. As such, teams have been assigned for kitchen duty, cleaning duty and tournament set-up.

Kitchen Duty: Tuesday/Thursday league nights: make coffee/tea, set out cookies (provided by Club) and after the Social Hour, do dishes and clean kitchen.

Cleaning Duty: Clubhouse to be dusted, vacuumed, tables to be cleaned, bathrooms cleaned and bathroom/kitchen floors washed. Schedule to be posted.

Tournament Set-Up: Team to prepare and set-up the greens for the game. Teams will be chosen from those who have registered to play in that Tournament.

Tournament Kitchen: See Anne / Dorothy to volunteer for our District Tournaments.

Greens/Yard Work: See Jim to volunteer for cutting, trimming, clean-up, etc.

WAIVER FOR PARTICIPANTS

ACKNOWLEDGEMENT AND ASSUMPTION OF RISK

I UNDERSTAND AND AGREE that there is potential risk for injury involved in the training and participation of any physical activity. I further understand and agree that participating in Lawn Bowling is a potentially dangerous activity. Bumps, bruises, scrapes, scratches and soreness are commonplace, and most participants will encounter this sort of minor injury from time to time. More serious injuries are possible, including sprains, strains, twists, cramps, and injuries of similar magnitude. The possibility of more serious injury exists, including fractured bones, broken bones, torn ligaments, though most participants do not encounter such serious injuries. There remains, despite safety precautions, the remote possibility of crippling or death. I **FREELY ACCEPT AND FULLY ACKNOWLEDGE** all such risks, dangers and hazards, resulting from my participation in any event hosted or sponsored by Ontario Lawn Bowls Association or the Port Perry Lawn Bowling Club.

I am also aware that I should discuss my participation in this activity with my physician to determine the effect on my current health.

It is my right and responsibility as a participant to immediately remove myself from participation in the program and notify the nearest official, if at any time I sense any unusual hazard or unsafe condition or if I feel that I am physically, emotionally, or mentally unfit for continued participation in the program.

I have read and understand the above statement of risk. I assume responsibility for my own safety, and I understand and accept the risks involved with my participation.

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND INDEMNITY AGREEMENT

I hereby agree as follows:

TO WAIVE ANY AND ALL CLAIM that I have or may in future have against the Port Perry Lawn Bowling Club and the Ontario Lawn Bowls Association, its coaches, officials, members, agents, directors, officers, employees and representatives, and other participants (all of whom are hereinafter collectively referred to as "Releasees").

I HAVE READ, understood and agree with the statements in the **ACKNOWLEDGEMENT AND ASSUMPTION OF RISK** portion of this document, and by assuming and acknowledging this risk, I completely absolve all **RELEASEES** from any and all liability for loss, damage, injury or expense that I may suffer, that a third party may suffer, or that my next of kin may suffer as a result of my participation in any of the activities and/or programs offered by the Releasees, **DUE TO ANY CAUSE WHATSOEVER**. I acknowledge my responsibility to ensure adequate medical personal health, dental and accident insurance coverage, as well as protection of my personal possessions.

IN ENTERING INTO THIS AGREEMENT I am not relying upon any oral or written representations or statements made by the Releasees other than what is set forth in this agreement.

I HAVE READ AND UNDERSTOOD THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS OR ASSIGNS MAY HAVE AGAINST THE RELEASEE.

Signed this _____ day of _____, 20__

Signature of Participant:

Printed Name of Participant:

Witness to Signatures

Printed Name of Witness