

**THE RELEASE AND WAIVER OF LIABILITY**  
**(Please read carefully before signing)**

The undersigned hereby acknowledges that participation in the Pitt Community College volleyball tryout and related activities involve inherent risk of physical injury, and undersigned, on behalf of the registrant, hereby assumes all such risks and does hereby release and forever discharge Pitt Community College and all employees and agents thereof from any and all liability of whatever kind of nature, arising from and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property, and consequences thereof, resulting from the registrant's participation in or involvement with this tryout, including any failure of equipment or defect in the premises, and does hereby agree to fully indemnify and hold harmless Pitt Community College and all employees and agents thereof against any and all claims, demands and actions by, or on behalf of, the registrant resulting from such injuries.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Parent or Guardian (if under 18)

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Participant

\_\_\_\_\_

Home Address

City

State

Zip

Home Phone

\_\_\_\_\_

Emergency Contact Address and Phone Number

\_\_\_\_\_

Name of Doctor and Phone Number

Insurance Policy Number