



**ADULT WAIVER/RELEASE  
AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY**

PLEASE READ CAREFULLY BEFORE SIGNING

In consideration of being allowed to participate in any way in **Sports Park of New York** amateur athletic sports leagues, tournaments, programs, related events and activities, I, \_\_\_\_\_, acknowledge, appreciate, and agree that:

Adult Participant's Printed Name

- The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
- I KNOWINGLY AND **FREELY** ASSUME ALL SUCH RISKS, both known and unknown, **EVEN IF** ARISING FROM THE **NEGLIGENCE** OF THE RELEASEES or others, and I assume full responsibility for my participation; and,
- I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE AND HOLD HARMLESS Sports Park of New York**, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, owners and lessors of premises used to conduct the event ("RELEASEES"), **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.**

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, I FULLY UNDERSTAND ITS TERMS, I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

\_\_\_\_\_  
Adult Participant's Signature (or Child's Printed Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Alternate Phone

\_\_\_\_\_  
Team Name (League Teams ONLY)

\_\_\_\_\_  
Team Manager's Name (League Teams ONLY)

Sports Park of New York ~ 525 Ballantyne Road ~ Rochester, New York 14623 ~ Phone: (585) 889-1320 ~ League Administrator: Sean C. Rook  
div. Amateur Sports Incorporated ~ 29 Wayfaring Lane ~ Rochester, New York 14612 ~ Phone/Fax: (585) 720-0618 ~ Office Administrator: Colette D. Rook

*Visit our website at [www.sportspark.net](http://www.sportspark.net)!*



**YOUTH PARTICIPANTS**  
**(UNDER AGE 18 AT THE TIME OF REGISTRATION)**

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This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

\_\_\_\_\_

(Parent/Guardian Signature)

\_\_\_\_\_

(Date)

Emergency Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

For Office Use Only – Do not write below this line.

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