

USTA/MIDWEST SE MICHIGAN DISTRICT ADULT LEAGUE CONSENT, WAIVER AND RELEASE FORM

LEAGUE: 2020 SEM ADULT

MATCH #: _____

Liability waiver: in consideration of the united states tennis association MIDWEST section's ("USTA/Midwest Section") acceptance of the player's ("participant") participation in its tournaments, leagues, player development program, competitions (including, but not limited to tryout competitions) other programs, and any event or activity related thereto (collectively "events"), the participant hereby agrees to this consent, waiver and release.

Participant agrees to assume the risks associated therewith, whether known or unknown and hereby releases, waives, discharges and covenants not to sue the USTA/Midwest section or district offices, and all of their directors, officers, agents, volunteers, sponsors, employees and successors and assigns (hereinafter referred to as "releasees") from and against any and all claims, demands, damages, causes of action, present or future, whether known or unknown, anticipated or unanticipated, resulting from or arising out of participation in the events and travel to and from such events, including, but not limited to, all liability related to injury and/or exposure to infectious syndromes or diseases to the person or property or resulting in illness and/or death of the participant, whether caused by the negligence of the releasees or otherwise by participating or attending this event and travel to and from such.

Participant understands the nature of USTA/Midwest Section events and is in good health and proper physical condition to participate in such events. Participant acknowledges and understands that there are inherent risks associated with participation in such events, which may involve the risk of exposure to infectious syndromes and diseases, serious illness, injury and/or death and/or property damage and he/she assumes full responsibility for any risk whatsoever, including but not limited to bodily injury, exposure, death or property damage arising out of or related to the event(s) whether caused by the negligence of releasees or otherwise.

Participant agrees that if, despite this waiver and release, participant, or anyone on participant's behalf, makes a claim, participant will indemnify, save, and hold harmless the releasees from and against any and all claims, demands, damages, or causes of action.

This document affects your legal rights. By your initials below, you acknowledge that you have read and understood the disclosures of risks, voluntarily accept those risks, and agree to be bound by the terms of this Waiver and Release.

**ALL PLAYERS MUST PRINT NAME & INITIAL THE MATCH CONSENT FORM IN ORDER TO BE ELIGIBLE TO PLAY
IN ANY USTA SE MICHIGAN ADULT LEAGUE TENNIS MATCH.**

FLIGHT: _____ **MATCH DATE:** _____

HOME TEAM: _____ **VISTING TEAM:** _____

#1 SINGLES

Name: _____

#1 SINGLES

Name: _____

#2 SINGLES

Name: _____

#2 SINGLES

Name: _____

#1 DOUBLES

Name: _____

Name: _____

#2 DOUBLES

Name: _____

Name: _____

#3 DOUBLES

Name: _____

Name: _____

#1 DOUBLES

Name: _____

Name: _____

#2 DOUBLES

Name: _____

Name: _____

#3 DOUBLES

Name: _____

Name: _____

Captains or representative, please submit a completed Match Consent form within 24 hours of your completed tennis match by email to adulttennis.semich.usta@gmail.com or via fax,(734) 421-1925.

Failure to submit a completed Match Consent form may result in an invalidation of your match scores.