

Wausau Area Pickleball
Membership Registration Form

First Name:	_____	Last Name:	_____
Date Of Birth:	_____	Gender:	_____
Current Rating:	_____	USAPA Reg No:	_____
Email:	_____	Phone:	_____
Address:	_____		
City:	_____	State:	_____
	_____	Zip:	_____
Emergency Contact:	_____		
Emergency Phone:	_____		

Liability Waiver:

- 1. I realize the nature of the Wausau Area Pickleball (WAP) club activities and the equipment used in conjunction with those activities may expose me to hazards or risks that may include minor injuries, broken or sprained limbs, overexertion, or heat exhaustion, along with other, more serious injuries, including hospitalization and death.*
- 2. In consideration of my participation in WAP club activities, I hereby accept all risk to my health or property and release the WAP, its Board of Directors, officers, agents, employees, independent contractors, and club members from any and all liability to me, my personal representatives, estate, heirs, next of kin, and assigns for any and all illness or injury to my person, including death, that may result from or occur during participation in the activities.*
- 3. I further agree that if any litigation or claim results arising out of, pertaining to, or in relation to my participation in any WAP club activity, and the WAP is named a party or joined as a party to such litigation or claim, I agree to hold them harmless, defend and indemnify them in regard to any judgment entered against them and in regard to their litigation expenses, including but not limited to reasonable attorneys' fees, costs, and out-of-pocket expenses.*
- 4. I have carefully read this agreement and understand it to be a release of all claims and causes of action for injury or death of myself or damage to my property that occurs as a result of participating in the above described activities and it obligates me to indemnify and hold harmless the Wausau Area Pickleball club if it is named for any liability for injury or death of any person and damage to property arising out of, pertaining to, or in relation to my participation in the activity. I have signed this agreement freely and without any inducement or assurance of any nature. Furthermore, I agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall remain in full force and effect.*
- 5. I further understand that this agreement shall be valid in regards to my participation in any and all WAP club activities as long as I remain a member in good standing.*

Code Of Conduct:

All Wausau Area Pickleball (WAP) club members agree to the following code of conduct, which is established to provide an environment in which all players can play the game to the best of their abilities – and most importantly, to enjoy themselves while doing so. This code applies to any WAP organized or sponsored event.

The WAP Code of Conduct is comprised of the following guidelines of behavior:

- Always exhibit good sportsmanship when playing or spectating. This can include good-natured ribbing, but never includes ill-natured remarks. Do not taunt. Keep the game FUN.*
- Never use profanity.*
- Never direct any form of abuse at others.*

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- *Never throw your paddle, or otherwise purposely mishandle any equipment.*
- *Be respectful of players of lesser ability; encourage their effort, praise their good shots, and don't disparage their poor*

- *Always strive to make correct line calls, but remember that if there is any doubt, you must call the ball 'in'.*
- *Never go onto a court while a point is in progress if you are not part of the game. Also, don't walk behind a court while a point is being played. Wait until play stops, then move quickly behind the court from one side to the other.*
- *Do not purposely distract your opponent while a point is being played.*
- *Stop play whenever an unsafe situation arises, such as a stray ball on the court, or a player getting injured.*
- *Do your best to warn those on adjacent courts if you hit a ball onto their court.*
- *Wear safe and proper attire, including shirts, and shoes designed for court sports. No offensive logos, designs, words, or phrases are allowed.*
- *Do not play if your movement or judgment is impaired by alcohol or other drugs.*
- *Accept responsibility for your guests and family members in attendance.*

Your initials below

_____ I authorize the WAP to share my name/contact information

_____ I authorize the WAP to use my phone for promotional purposes

_____ I authorize the WAP to share my email/phone with WAP members

WAP partners with the Marathon County Parks Department, YMCA and Greenheck Fieldhouse, membership names and/or contact information could be shared with partners. Occasionally photos are shared on Facebook or in flyers/brochures for promotional purposes

Sign: _____

Date: _____

Parent Sign: _____

Parent Name: _____

Yearly Membership (May 1 to April 30) **\$15.00**

Checks payable to "Wausau Area Pickleball"

Please give check and the signed & initialized membership form to a board member or mail them to below address

Mailing Address:

Wausau Area Pickleball, P.O. Box 662. Schofield WI , 54476

Email:

WausauPickleball@gmail.com