



Deuces Wild, LLC d.b.a. Triple P BBQ
 3312 W. Rock Falls Road, Rock Falls, IL 61071
 Agent Contact: Brandy Wren 815-900-7557

Individual Waiver Form

Team Name: _____ Night(s) Participating: _____

Player Name: _____

Address: _____

City _____ State: _____ Zip: _____

Date of Birth: _____ Age: _____ Phone: _____

Email: _____

LIABILITY WAIVER

_____ I affirm that I have been informed of the league rules and agree to participate
 Initial according to all the rules and regulations of the 2020 Sand Volleyball League
 hosted by Deuces Wild, LLC., d.b.a. Triple P BBQ.

_____ I understand that participating in sand volleyball may have an element of risk
 Initial and take full responsibility for my actions and physical condition.

_____ I release and agree to indemnify and hold harmless Deuces Wild, LLC and its
 Initial representatives and agents from all claims or liability for damages and/or
 injuries, to myself or any other player or any third parties, incurred in connection
 with any 2020 Sand Volleyball sporting event or activity associated with this
 league and my participation.

Print Name _____

Signature _____

Date _____ Received by: _____

Deuces Wild LLC., Authorized Agent