

# BELLEVUE BADMINTON CLUB

## WAIVER AND RELEASE

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**\*Required**

**General:** In consideration of allowing the below named student to enroll in badminton classes and the use by the students of the premises and the property of the Bellevue Badminton Club, Inc, the undersigned, being the legal and acting guardians of the student(s), acting for themselves and on behalf of the student, release and hold harmless Bellevue Badminton Club, Inc., its owners, officers and employees of and for any and all liability, claims, actions and causes of actions whatsoever, arising out of or relating to any loss, damage or injury that may be sustained by the student while in, on, or upon the premises of the Bellevue Badminton Club, Inc.

I am fully aware of and appreciate the risks, including the risk of bodily injury as well as other damages and losses associated with participation of badminton sports. I further agree that Bellevue Badminton Club, Inc. along with its employees, agents, officers, and directors shall not be liable for any losses, expenses, or damages occurring as a result of my child(ren)'s participation in the class, activities or event except where such loss of damage is the result of the intentional or reckless conduct of one of the groups or individuals identified above.

**Medical Attention:** The undersigned, being duly aware of the risks and hazards inherent upon participation in the classes, activities and events being conducted by Bellevue Badminton Club, Inc., acting for themselves and the student hereby elect voluntarily to enter upon said premises under the control of said corporation, knowing their present condition. The undersigned acting for themselves and the student, hereby voluntarily assume all risks of loss, damage, or injury that may be sustained by the student while in said premises described above. In the event of any incident which may require immediate medical/dental or any other emergency attention/care, in which the Legal Guardian cannot be notified in a reasonable time through reasonable means, I hereby authorize Bellevue Badminton Club, Inc., to take all necessary actions as it relates to immediate medical training attention, transportation and emergency medical services as warranted in the course of care of the undersigned student. I realize that I will be responsible for all fees and expenses as they may relate to this medical attention paragraph.

**Media Release:** Bellevue Badminton Club, Inc., or any party designated by Bellevue Badminton Club, Inc., may photograph or film all student while attending the premises of Bellevue Badminton Club, Inc., and use of any and all such photos, video footage and/or video streaming for promotion, sales, publicity and advertising purposes for use in all media, including, but not limited to, the internet.

**Class Policies & Safety:**

Our full class policies & safety can be found on our website: <http://www.bellevuebadminton.com/classes/junior-class-policies-safety/>

Registration Deadline is the Friday before the first day of the session.

Signup fee is due upon registration. This is a non-refundable deposit to secure your spot in class.

Absences. Sorry, we don't have makeup classes.

Cancellations before the first day of the registered session will receive a full refund of the tuition. Cancellations after the first day of the registered session will receive an 80% refund of the remaining class tuition. There are no refunds after Week 4 of the registered session.

Due to insurance regulations, adults and un-enrolled siblings are NEVER allowed in the gym area.

**Acknowledgement:** This release shall be binding upon distributes, heirs, next of kin, executors and administrators of the student and undersigned. In signing this release, the undersigned hereby acknowledges:

- A) that he or she has read, understands, and signs this release voluntarily, and
- B) that the undersigned signing as legal guardian is a true legal guardian.

By signing below, I agree that I have read and understand the Bellevue Badminton Club Class Policies & Safety, and procedures described above.

Student Name(s)*	
Student Signature*	Date*  / /
IF STUDENT IS A MINOR: Parent or Legal Guardian Signature*	Date*  / /
Printed Parent or Legal Guardian Name*	