



LIABILITY WAIVER FOR GUESTS UNDER 18

WAIVER OF RESPONSIBILITY

I, _____ (Parent or Guardian) give permission for _____
(Player) to attend a tennis event at the Mill Creek Tennis Club and agree to all the following.

MEDICAL RELEASE: I hereby consent to emergency medical and or/ hospital service that may be rendered by or at accredited hospitals, by appointed physicians, in the event such need arises in the opinion of a duly licensed physician.

WAIVER AND INDEMNITY AGREEMENT: Acceptance of my entry in these events is without responsibility of any kind by the Mill Creek Tennis Club and Mill Creek Tennis Club, LLC, Avanti Sports Group, Avanti Sports, Mill Creek Country Club and any of its owners, managers, employees, affiliates, agents, representatives or associated persons or entities (herein collectively MCTC) from any and all liability of any nature or kind resulting from any injury suffered during any event, sport or activity that occurred at or near the MCTC facility or from any event sponsored by MCTC and Avanti Sports. I understand that that this agreement means that I will not make a claim against MCTC, Avanti Sports and Avanti Sports Group for any direct, indirect or consequential damages caused by any such injuries. I also understand by signing that I am waiving liability and releasing MCTC and understand that I am solely responsible for injuries to myself. I HAVE READ AND UNDERSTAND THE FOREGOING RELEASE AND IMDEMNITY AGREEMENT.

Signed: _____ (Parent or Guardian) Date: _____

In case of Emergency please contact _____ (Name of Responsible Party)

At _____ (Phone Number)

Contact Email Address: _____