



Castleton Sports Club Inc. Volleyball Participant Registration Form

PARTICIPANT INFORMATION

Full Name:	Date of Birth:
Mailing Address:	City/Town:
Postal Code:	Email:
Primary Phone Number:	Medical Conditions:

EMERGENCY CONTACTS

Emergency Contacts must be available during program hours	
Primary Contact Full Name:	Primary Contact Relationship:
Primary Contact Phone:	Primary Contact Secondary Phone:

REGISTRATION FEES

Oct 7 – April 28, 2026 6:30-8:30 p.m. in Northumberland Hills Public School Gymnasium

****CLEAN, DRY SHOES ARE MANDATORY****

**\$80.00 Adult fee. Payments can be made via e-transfer to treasurer@castletonsportsclub.ca
password: sportsclub**

Children 13 yrs old and over are free **with a paying adult**. **All child must be accompanied by an adult at all times during their time in the building**

Parent/Guardian Signature if player under 18 _____

****Please see reverse side (Pg.2) for Waiver****



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WAIVER/RELEASE

Release of liability, Terms and Conditions,

Assumption of risks and indemnity agreement for Castleton Sports Club Inc. Volleyball (hereinafter referred to as the "Release Agreement")

By agreeing to this document, you will **waive** or give up certain legal rights, including the right to sue or claim compensation following transmission of a communicable disease or an accident. Please read carefully!

TO: CASTLETON SPORTS CLUB INC. VOLLEYBALL associations, clubs and their respective directors, officers, employees, instructors, agents, representatives, volunteers, independent contractors, subcontractors, sponsors, successors and assigns (hereinafter collectively referred to as the "Releasees").

ASSUMPTION OF RISKS

I am aware that participating in the sport of volleyball involves many risks, dangers and hazards including, but not limited to: the transmission of a communicable disease, including but not limited to COVID-19; collision with other persons or objects; being hit by a ball; the risk of stroke, heart attack or other similar life threatening conditions caused by physical exertion; the risk of personal injury including, but not limited to, strains, sprains, fractures, brain injury, spinal cord injury including paraplegia or quadriplegia, or death; loss of balance or control; slips, trips and falls; negligent first aid; failure to act safely or within one's own ability; negligence of other persons; and, negligence on the part of the releasees. I understand that negligence includes failure on the part of the releasees to take reasonable steps to safeguard or protect me from the risks, dangers and hazards referred to above. I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, or property damage or loss resulting therefrom.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of the Releasees accepting my application for membership in Castleton Sports Club Inc. and, as applicable, my local association or club, and permitting my use of the facilities and premises provided by the Releasees (hereinafter "the premises"), I hereby agree as follows:

1. To waive any and all claims that I have or may in the future have against the releasees, and to release the releasees from any and all liability for any loss, damage, expense or injury including death that I may suffer, or that my next of kin may suffer, as a result of my participation in the sport of volleyball including, but not limited to, my use of the premises due to any cause whatsoever, including negligence, breach of contract, or breach of any statutory or other duty of care including any duty of care owed under any provincial occupiers' liability legislation on the part of the releasees. I understand that negligence includes the failure on part of the releasees to take reasonable steps to safeguard or protect me from the risks, dangers and hazards referred to above.
2. To hold harmless and indemnify the releasees from any and all liability for any damage to property of or personal injury to any third party, resulting from my use of or presence on the premises;
3. This Release Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
4. This Release Agreement and any rights, duties and obligations as between the parties to this Release Agreement shall be governed by and interpreted solely in accordance with the laws of the Province of Ontario.
5. Any litigation involving the parties to this Release Agreement shall be brought solely within the Province of Ontario and shall be within the exclusive jurisdiction of the Courts of the Province Ontario.

In entering into this Release agreement, I am not relying upon any oral or written representations or statements made by the Releasees with respect to the safety of volleyball other than what is set forth in this Agreement.

I have read and understand this release agreement and I am aware that by agreeing I am waiving certain legal rights which I or my heirs, next of kin, executors, administrators, assigns and representatives may have against the releasees.

Signature of Participant:	Date: (yyyy/mm/dd):
Signature of Parent/Guardian:	Date: (yyyy/mm/dd):
(If participant is under the age of 18)	