**Seattle Badminton Club**

10858 117th Place NE, Kirkland WA98033

NON-MEMBER/GUEST REGISTRATION FORM

First and Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Club Rules and Regulations** - I understand as non-member of Seattle Badminton Club that I must adhere to all of Seattle Badminton Club’s rules and regulations. If at anytime I do not abide by these rules, I may be asked to leave the facility and I understand that I forfeit any fees paid.

**Liability Waiver** - I understand and acknowledge there is risk involved in being in and around Seattle Badminton Club’s facilities, including, but not limited to, the risks involved in utilizing equipment or participating in any exercise or fitness activity. In consideration for being allowed to utilize Seattle Badminton Club’s facilities, I agree to assume the risk and full responsibility for any and all injuries, losses, or damages, that might occur to me while on the premises of Seattle Badminton Club; and to the maximum extent allowed by law, I agree to waive and release any and all claims, suits, or related causes of action against Seattle Badminton Club, Inc., its owners, officers, employees, or agents, for injury, loss, death, costs, or other damages to them, their heirs or assigns, or third parties for claims, suits, or related causes of action asserted against Seattle Badminton Club arising from their conduct while on the premises of Seattle Badminton Club and this waiver and release shall bind myself and my families and spouses or domestic partners, if I am alive, as well as the estate, family, heirs, administrators, personal representatives or assigns if I am deceased, and shall be deemed as a “Release, Waiver, Discharge and Covenant” not to sue Seattle Badminton Club. I further agree to release, indemnify, defend and hold Seattle Badminton Club harmless from any liability whatsoever for future claims presented by their children for any injuries, losses or damages.

Signature / Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Please circle | Admission  $15.00 | Racket  Rental  $3.00 | Cash |
| Credit |