

Bubble Soccer Halifax Registration Form and Waiver of Liability

Participant's First Name: _____
Last Name: _____

E-mail Address: _____

Phone Number 1: _____

Phone Number 2: _____

Event /League/Date: _____

Approximate height and weight help Bubble Soccer Halifax evenly match teams when possible but are not required to register.

Approximate Height: _____ foot inch /meters

Approximate Weight _____ lbs. / kg

Emergency Contact:

Name: _____ Phone Number: _____

Participants under the age of 18 must have waiver signed by a parent or legal guardian.

This agreement releases Bubble Soccer Halifax from all liability relating to injuries that may occur during any and all activities related to the rental or participation in Bubble Soccer (whether during prior or post usage). By signing this agreement, I agree to hold Bubble Soccer Halifax entirely free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence.

I also acknowledge the risks involved in Bubble Soccer. These include but are not limited to personal injury, death, property damage or loss resulting there from. I swear that I am participating voluntarily, and that all risks have been made clear to me. Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity.

By signing below I forfeit all right to bring a suit against Bubble Soccer Halifax for any reason. In return, I will receive participation in Bubble Soccer. I will also make every effort to obey safety precautions as listed in writing and as explained to me verbally. I will ask for clarification when needed.

I, _____ fully understand and agree to the above terms.

Participant Name: : _____

Participant Signature: : _____ Date: _____

Parent / Guardian Name (if under 18 years old: _____

Parent / Guardian Signature: _____ Date: _____