Serve Up Pickleball

Liability Release & Waiver of Claims

Version v1-2026 · Effective October 2026

In consideration of being permitted to participate in pickleball activities, programs, classes, and events organised or facilitated by Serve Up Pickleball, Inc. ("SUP"), the undersigned participant (or parent/legal guardian if the participant is a minor or requires a guardian) agrees to the following terms:

1. Assumption of Risk

I understand that participation in Serve Up Pickleball activities involves physical activity and inherent risks, including but not limited to physical injury, falls, and contact with equipment or other participants. I voluntarily assume all such risks.

2. Liability Release

I, on behalf of myself and/or the participant named above (and their heirs, executors, and assigns), hereby voluntarily release, waive, discharge, and covenant not to sue Serve Up Pickleball, Inc., its officers, directors, employees, volunteers, agents, and representatives from any and all claims, demands, losses, or liability arising out of or related to participation in Serve Up Pickleball activities, except in cases of gross negligence or wilful misconduct.

3. Medical Authorisation

I authorise SUP staff to seek emergency medical treatment on my behalf (or on behalf of the participant named above) if I/ they are unable to do so. I acknowledge that SUP is not responsible for any medical costs incurred.

4. Rules & Conduct

I agree to follow all facility rules, program guidelines, and instructions from SUP staff and instructors. I understand that failure to comply may result in removal from the program without refund.

5. Governing Law

This agreement shall be governed by the laws of the State of New York. If any provision is found unenforceable, the remaining provisions shall remain in full force and effect.

Participant Information

First Name *

Last Name *

Date of Birth *

Phone Number *

Email Address

Parent / Legal Guardian (required if participant is under 18)

Guardian Full Name

Relationship to Participant

Guardian Typed Signature

Guardian Signature Date

Emergency Contact

Emergency Contact Name *

Emergency Contact Phone *

Optional Releases (not required to participate)

& Photo Release — I consent to photographs being taken during activities for use in Serve Up Pickleball promotional materials.

& Media Release — I consent to video recordings being taken during activities for use in Serve Up Pickleball promotional materials.

I acknowledge that I have read this release, understand its terms, and sign it freely and voluntarily. If signing on behalf of a minor, I confirm I have the legal authority to do so and that the participant and I are bound by these terms.

Participant / Guardian Typed Signature

Date

Printed Name