

Liability Waiver & Hold Harmless

In consideration of being permitted to participate in the Pickleball Tournament on Saturday, July 25, 2026 (the “Activity”) at Katy Christian Community Church (“KCCC”), located at 24747 Roesner Road, Katy, TX 77494, I agree to the following:

Medical Authorization and Activity Release

I voluntarily agree to participate in the Activity and acknowledge that participation may involve certain risks, including bodily injury, illness, property damage, or other unforeseen circumstances. I agree not to hold KCCC, its employees, staff, agents, sports coordinators, or church volunteers liable for any injury, loss, or damage arising out of or related to my participation in the Activity.

I further agree to RELEASE, WAIVE, DISCHARGE, INDEMNIFY, DEFEND, AND HOLD HARMLESS KCCC, its employees, staff, agents, sports coordinators, and church volunteers from and against any and all claims, liabilities, damages, losses, expenses, demands, actions, or causes of action of any kind, whether known or unknown, anticipated or unanticipated, arising out of or related to my participation in the Activity.

I acknowledge that I have had the opportunity to inspect the facilities and equipment to be used during the Activity and find them acceptable for participation.

In the event of illness or injury, I authorize KCCC, its employees, staff, agents, activity coordinators, or church volunteers to seek appropriate medical assistance on my behalf. I further authorize licensed physicians, medical personnel, hospitals, urgent care centers, or other healthcare providers to administer medical treatment deemed necessary. I understand and agree that I am solely responsible for any and all medical expenses incurred and agree to reimburse KCCC for any expenses advanced on my behalf, if applicable.

By signing below, I acknowledge that I have carefully read and fully understood this Medical Authorization and Activity Release. I agree to abide by all rules, policies, and instructions established by KCCC related to the Activity. I further agree that this release shall be binding upon my heirs, representatives, successors, assigns, and personal agents.

I HAVE READ THIS WAIVER AND RELEASE, UNDERSTAND THAT I AM GIVING UP CERTAIN LEGAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

Name of Participant (Print): _____

Signature of Participant: _____

Date: _____ Telephone Number: _____

Address: _____