



Virtual Table Tennis Session Waiver Participant Waiver and Release of Liability

I, the undersigned, hereby acknowledge and agree to the following:

1. I understand that my participation in the Virtual Table Tennis Sessions is voluntary and that I am free to withdraw at any time.
2. I acknowledge that participating in virtual Table Tennis sessions involves certain risks, including but not limited to physical injury, and I assume all risks associated with my participation.
3. I confirm that I am in good health and have no medical conditions that would prevent me from participating in these sessions. I agree to consult with a physician if I have any concerns regarding my ability to participate.
4. I hereby release, waive, and discharge Table Tennis North, its officers, employees, agents, and volunteers from any and all claims, demands, or causes of action that may arise from my participation in the Virtual Table Tennis Sessions, including any claims for personal injury, property damage, or wrongful death.
5. I agree to indemnify and hold harmless Table Tennis North from any and all claims, damages, or expenses arising from my participation in the Virtual Table Tennis Sessions.
6. I grant permission for Table Tennis North to use any photographs, videos, or recordings taken during the sessions for promotional purposes.

By signing below, I acknowledge that I have read and understood this waiver and that I agree to its terms.

Participant Name:

Signature:

Date:

Parent/Guardian Signature (if participant is under 18):

Please return this signed waiver to Table Tennis North before participating in the Virtual Table Tennis Sessions by e-mail. Thank you!

