

# Brazos Valley Pickleball Association (BVPA)

## Membership Registration Form



| MEMBER INFORMATION  |                   |   |              |
|---|-------------------|---|--------------|
| Last Name:  |                   | First Name:                                       |              |
| Mailing Address:  |                   |   |              |
| City:   |                   | State:  | Zip:         |
| Cell Phone:   |                   | Home Phone:                                       |              |
| Email Address:  |                   |   |              |
| EMERGENCY CONTACT PERSON  |                   |   |              |
| Name:   |                   | Relationship:                                     |              |
| Cell Phone:   |                   | Other Phone:                                      |              |
| ADDITIONAL INFORMATION  |                   |   |              |
| Date of Birth (Month/Year):   |                   | Are you a USAPA Member? Yes, #_____ No Interested |              |
| Gender: Male Female   |                   | USAPA Player Rating: N/A 2.5 3.0 3.5 4.0 4.5 5.0  |              |
| Preferred Communication: Email Phone Text   |                   | CPR Trained? Yes, Expiration Date: _____ No       |              |
| Interested in: ___ Learning to Play ___ Recreational Play ___ Competitive Play ___ Tournaments ___ Skill Clinics  |                   |   |              |
| PAYMENT INFORMATION   |                   |   |              |
| <i>Member dues are \$30 per year (\$20 after June 30<sup>th</sup>) or \$5 per day. These fees help to pay for cost of equipment (nets, balls, floor markers, tape), fees for facility use, etc.</i> |                   |   |              |
| Date of Payment   | Amount of Payment | Form of payment                                   | Collected by |
|   |                   |   |              |
|   |                   |   |              |
|   |                   |   |              |

### Release of Liability

I, the undersigned, plan to participate in the Brazos Valley Pickleball Association's (BVPA) activities: pickleball play and other activities hosted by BVPA. I hereby release the BVPA and each of its officers, players, all associates, and in addition, all venues used for practice and/or tournament play, from any and all liability as a result of any injuries which may occur during my participation. In addition, I fully understand that I am responsible for any and all medical expenses which may be incurred as a result of any accidental injuries. \_\_\_\_\_ Initial

### Photo Release

I agree to grant to Brazos Valley Pickleball Association and its authorized representatives permission to record on photography film, digital camera and/or video, pictures of my participation. I further agree that any or all of the material photographed may be used, in any form, as part of any future publications, brochure, or other printed or electronic materials used to promote BVPA, and further, that such use shall be without payment of fees, royalties, special credit or other compensation. \_\_\_\_\_ Initial

Signature

Date