



Tournament Waiver 2026

PARTICIPANT RELEASE OF LIABILITY AND ASSUMPTION OF RISK

AGREEMENT

Must be 18 or older.

ORGANIZATION NAME: South Jersey Kayak Bass Fishing Club (SJBFC)

PARTICIPANT NAME: (Please Print)

In consideration of being allowed to participate in any way in the program, related events and activities, I the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death.
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation.
3. I willingly agree to comply with terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE South Jersey Kayak Bass Fishing Club (SJBFC), its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and leases of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any INJURY, DISABILITY OR DEATH I may suffer, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. You are participating in any SJBFC tournament, meeting and any other SJBFC activity at your own risk and can hold nobody responsible but yourself.
6. This waiver covers all SJBFC tournaments, meetings and any other SJBFC activities for the entire 2026 calendar year.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant's Signature:

Date:

Date of Birth _____

Phone Number _____

Emergency Contact (Print Full Name) _____

Phone Number _____