



Edmonds Petanque Club 10th Annual Food Bank Tournament

In Memory of Dick Van Hollebeke

WHEN: Saturday, August 28, 2021

WHAT: Doubles Tournament: Men, Women, or Mixed Teams, Formed in Advance by Participants. 24 Team Limit.

WHERE: Sierra Park. 19080 80th Ave. W; Edmonds, WA 98026. Parking Available

CHECK-IN: 8:30am at Sierra Park on August 28. **COVID VACCINATION REQUIRED.**

REGISTER: By mail or on-line. Use the reverse of this paper for team registration or register on-line at www.edmondspetanque.org. Registration and waiver must be received by August 27

Mail registration to: Michelle Martin
1001 5th Ave. S. #206
Edmonds, WA 98020

START: 9:00am. Games Begin. Play will likely conclude by 4:00pm

FEES: \$60 PER TEAM. Payable by Personal Check or On-line with Credit Card via the club's PayPal account edmondspetanque@gmail.com. Or scanning this QR Code with your phone camera.



Scan. Pay. Go.

Registration fee covers donuts and coffee, sandwich lunch, and drinking water.

PRIZES: Medals awarded to 1st, 2nd, and 3rd places in Concours. Prizes for 1st and 2nd in Consolante. Prize Raffle for a Variety of Wonderful Items.

INFO: Visit www.edmondspetanque.org or call Jack McHenry (206-832-9179)

**AFTER TOURNAMENT EXPENSES ARE PAID, 100% OF TOURNAMENT
PROCEEDS GO DIRECTLY TO THE EDMONDS FOOD BANK**

**PLEASE BRING NON-PERISHABLE FOOD ITEMS FOR DONATION TO THE FOOD BANK! OR
MAKE A CASH DONATION AT THE TOURNAMENT!**

SUPPORT THE FOOD BANK -- REGISTER NOW!

STANDARD SPORTS LIABILITY WAIVER

Releasees: 1. The Federation of Petanque USA and FPUSA’s Member Clubs and Events; 2. The Edmonds Petanque Club (EPC), its Members, its Staff, its Board of Directors, the sponsors of its Sanctioned Events; and 3. The City of Edmonds, WA, its staff, and elected officials.

Sport Activity: Petanque

I acknowledge that this sport is an extreme test of a person’s physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people, including but not limited to, participants, volunteers, spectators, coaches, event officials, event monitors, and/or producers of the event and lack of hydration. These risks are not only inherent in athletics but are also present for volunteers.

I hereby assume all of the risks of participating and/or volunteering in this sport’s events.

I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them or because of their possibility liability.

I certify that I am physically fit and have been fully vaccinated against COVID-19, have sufficiently trained for participation in this sport’s events, and have not been advised otherwise by a qualified person.

I acknowledge that this Accident Waiver and Release of Liability form will be used by the event holders, sponsors, and organizers, in which I may participate and that it will govern my actions and responsibilities at said events.

In consideration of my application and permitting me to participate in this sport, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: To waive, release and discharge from any and all liability for my death, disability, personal injury, illness, property damage, property theft or actions of any kind which may hereafter accrue to me including my traveling to and from events, the following entities or persons: all the Releasees named in the first paragraph of this form.

I hereby consent to receive medical treatment which may be deemed advisable in event of injury, accident and or illness during this sport’s events.

I understand that at this sport’s events or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability shall be construed broadly to provide a related and waiver to the maximum extent permissible under applicable law.

EDMONDS PETANQUE CLUB – FOOD BANK TOURNAMENT REGISTRATION

FIRST AND LAST NAME (Print) _____

ADDRESS _____

PHONE AND EMAIL _____

YOUR TEAMMATE’S FIRST AND LAST NAME _____

I hereby certify that the information provided in the above registration is current and accurate. I further certify that I have read the above waiver of liability and that I understand and agree with its content.

SIGNATURE _____ DATE _____

AMOUNT PAID _____

Register on-line at www.edmondspetanqueclub.org and pay with credit card or PayPal OR mail your signed registration form and personal check made out to “Edmonds Petanque Club” to Michelle Martin; 1001 5th Ave. S #206; Edmonds, WA 98020.