

Parks and Recreation

1730 Continental Place – Mount Vernon, WA 98273 360-416-1350 – parksrec@co.skagit.wa.us www.skagitcounty.net/parks

PARTICIPANT WAIVER AND CONTRACT

programs	ation's 2024-2025 Adult Bask e	, wish to participate in Skagit County Parks tball Leagues. I realize that participating in n injury. Further, I agree that in consideration for:	
 I assume all risks of injury incurre in the above named activity. 		ed or suffered by me while at, or participating	
2)	elected officials, heirs, Agent officials, scorekeepers, and in School District and the Moun claims or losses sustained by undersigned, acknowledge th	t to sue Skagit County, its officers, employees, executors or administrators; contracted sport estructors; Skagit Valley College, La Conner Vernon School District from any and all rights, me while at, or participating in this activity. I, that I have read this statement in its entirety, and erms of this waiver and contract.	s ne
Participant Name (print)		Signature (Must be 18 Years Old)	
Mailing Address		City	
Home Phone/Work Phone		E-mail	
Date		 Team	

No persons are eligible to participate until this form is completed and given to a Skagit County Parks & Recreation Department Representative.