

Murray City Parks and Recreation

Outdoor Pickleball

Session 2



League Information

This six-week league is five weeks of team play followed by a single elimination tournament. Each team will consist of 2 adult players (18 years and older). Play format will be doubles round robin, regular scoring to 11 points, cap at 13. All divisions will have a 15 minute warm-up before game time.

TUESDAY May 17– June 21

MORNING Games 9:15am

Division 1: Women's 3.5

EVENING Games 6:15pm

Division 2: Men's 3.0-3.5

Division 3: Mixed 3.0-3.5

(Mixed team must consist of one male and one female)

THURSDAY May 19– June 23

MORNING Games 9:15am

Division 1: Women's 2.5-3.0

EVENING Games 6:15pm

Division 2: Men's 4.0

Division 3: Women's 3.5–4.0

Up to one game may be made-up if games are canceled due to inclement weather.

Cost: \$70 per team

Location: Murray Park Pickleball Complex (165 Myrtle Ave.)

Deadline: **Monday May 13, or until full**

\$5 late registration fee added after deadline

Register online at www.mcreg.com

For more information call 801-264-2614



Recreation Coordinator Tasha, tlarocco@murray.utah.gov

Murray City Recreation Outdoor Pickleball Registration Form

Name: _____ Phone: _____ DOB: _____ M/F: _____

Address: _____ Zip Code: _____

Email Address: _____

Emergency contact: _____ Relationship: _____ Phone: _____

Team Name: _____

Partner Name: _____ M/F: _____ Phone: _____

How did you hear about this program? Email ___ Murray Journal ___ Murray Website ___ Flyer ___ Social Media ___
Poster ___ From a Friend ___ Previous Participant ___ Other ___

TUESDAY _____

THURSDAY _____

Division 1: Women's 3.5 _____

Division 1: Women's 2.5-3.0 _____

Division 2: Men's 3.0-3.5 _____

Division 2: Men's 4.0 _____

Division 3: Mixed 3.0-3.5 _____

Division 3: Women's 3.5-4.0 _____

IN CONSIDERATION OF being allowed to participate in any way in **Murray City Recreation Outdoor Pickleball League** (the "Activity") and its related events and activities, I hereby acknowledge, appreciate, and agree that:

The risks of injury and illness (including, but not limited to, physical or psychological injury, communicable diseases such as MRSA, influenza, COVID-19, etc.), pain, suffering, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and death) of participating in the Activity are significant, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE of others, including, but not limited to, other participants, volunteers, spectators, coaches, and Activity officials, and I assume full responsibility for my participation; and,

I willingly agree to comply with the Activity's rules and conditions for participation. If, however, I observe any unusual or significant hazard during my presence or participation in the Activity, I will remove myself from the Activity and bring such attention of the nearest official immediately; and,

I for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Murray City Corporation, its employees, officers, directors, volunteers, elected officials, and agents (hereinafter collectively referred to as the "City"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, and from any and all liabilities incident to my participation in the Activity, to the fullest extent permitted by law.

I understand that the City shall have no responsibility to pay for any medical treatment and related costs if I become injured, sick, or otherwise harmed while participating in the Activity and, in the event that I should require medical care or treatment for any injury or illness, I agree to be financially responsible for any costs incurred as a result of such treatment.

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

Signature: _____ Date _____

OFFICE USE ONLY

Paid \$ _____

CSH CHK VISA

MC AMX DISC

Date _____

Staff _____