



## MEMBERSHIP REGISTRATION FORM

(PLEASE PRINT)

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ EMAIL \_\_\_\_\_

check one: JUNIOR (UNDER 18) \_\_\_\_\_ \$5 ADULT \_\_\_\_\_ \$15

GENDER(M/F) \_\_\_\_\_ CITIZENSHIP COUNTRY \_\_\_\_\_

DATE OF BIRTH (MM/DD/YYYY): \_\_\_\_\_

FPUSA requires the birthdate, country of citizenship, and a photo to produce an international pétanque membership card. This card will serve as a valid national and international pétanque license. All applications must include a signed Accident Waiver and Release of Liability form. Membership renewals submitted after January 25th of each year are subject to a \$5.00 late fee. You can either email a photo (head & shoulders) to [CarolinaPetanque@Yahoo.com](mailto:CarolinaPetanque@Yahoo.com) or request a photo be taken in-person by one of the Carolina Pétanque officers.

MAIL COMPLETED FORM, ACCIDENT WAIVER AND RELEASE OF LIABILITY ALONG WITH YOUR MEMBERSHIP FEE TO:

Jesse Israel, Treasurer for Carolina Pétanque  
P.O. Box 5515  
Asheville NC 28813

MAKE CHECKS PAYABLE TO: **CAROLINA PETANQUE**

**OR** print, sign, scan and email your form to [secretary@carolinapetanque.com](mailto:secretary@carolinapetanque.com) along with your payment to the above address or via PayPal by scanning the included QR code.

The Federation of  
Pétanque USA



Scan. Pay. Go.

**REQUIRED FOR ALL ADULT MEMBERS AND PARTICIPANTS IN FPUSA**

**ACCIDENT WAIVER AND RELEASE OF LIABILITY**

Insured: **Member Clubs & Events of the Federation of Pétanque USA**

Sport Activity: **Pétanque**

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, and 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 possible liability without fault.

I certify that I am physically fit, have sufficiently trained for participation in the event 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, 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: **Federation of Pétanque USA, its Member Clubs, and Sanctioned Events**

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

I understand that at this event 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 release and waiver to the maximum extent permissible under applicable law.

**I hereby certify that I have read this document and understand its content.**

PARTICIPANT’S NAME

SIGNATURE OF PARTICIPANT

DATE SIGNED

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FPUSA MEMBER CLUB:

**PARTICIPANT ACCIDENT WAIVER & RELEASE OF LIABILITY**

(Original to be sent to the FPUSA Secretary and a copy kept for your club’s files.)

**UNDER 18s**

**ACCIDENT WAIVER AND RELEASE OF LIABILITY**  
for use by all FPUSA Junior Members and participants under 18 years of age

**UNDER 18s**

**Insured: Member Clubs & Events of Federation of Pétanque USA**

**Sport Activity: Pétanque**

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

**PARTICIPANT'S NAME:** \_\_\_\_\_

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

**I hereby certify that I have read this document and understand its content.**

\_\_\_\_\_  
**SIGNATURE OF PARTICIPANT'S PARENT OR LEGAL GUARDIAN**

\_\_\_\_\_  
**DATE SIGNED**

**FPUSA MEMBER CLUB NAME:** \_\_\_\_\_

**PARTICIPANT ACCIDENT WAIVER & RELEASE OF LIABILITY**  
(Original to be sent to the FPUSA Secretary and a copy kept for your club's files.)