



Membership Application Form

Member No. _____
Office Use Only

Date: _____

In accordance with the rules of the Prescott Indoor Pickleball Association (P.I.P.A.), all participants wishing to become members must complete this form and pay an annual fee of \$25.00 per member. All visitors who wish to play must also complete this form.

Name: _____

Address: _____

Phone: Home _____ Cell _____

Email Address: _____

Member Signature: _____

Administrators Signature: _____
Office Use Only

Rules of the Court/Liability Compliance Waiver

All members or guest participants who are not yet members, must complete and sign a liability waiver in accordance with the rules of the Prescott Unified School District, Washington Elementary School, and Prescott Indoor Pickleball Association (P.I.P.A.). Anyone not willing to comply with this request will not be allowed to play at this facility.

Prescott Indoor Pickleball Association (P.I.P.A.) currently carries a liability insurance policy with a reputable company. This protects our organization and the owners of the facility where we play from any possible litigation due to an accident and/or injury suffered by any player/person at our facility. This includes members and non-members. It is the sole responsibility of each player/person to provide any insurance coverage, medical cost for services, emergency transport, etc., needed for any injury/accident they may sustain and is a direct result of any activity at this facility, be it court-play or otherwise. This also covers the property in and around Washington Elementary School, Prescott AZ. A copy of the P.I.P.A. Liability Insurance Information is available upon request.

Prescott Indoor Pickleball Association (P.I.P.A.) reserves the right to revoke any membership and/or expel any person from this facility due to any behavior that is deemed unacceptable such as, but not limited to; fighting, unfair play, excessive foul language and/or poor sportsmanship. If the person being accused of such behavior wishes to protest their expulsion from P.I.P.A., they can request a special meeting with the Membership Committee, at a time to be determined by the committee, and present their argument. Continuation of expulsion or overturning of the decision will be determined by the committee members at that time. The member in question will be allowed to continue playing at this facility until the verdict is determined unless the Committee deems it unsafe to any other player(s).

I agree to comply with the above rules, regulations and liability compliance of the Prescott Indoor Pickleball Association (P.I.P.A.) and its Committee.

Member Signature: _____