

Madison Platform Tennis Club, LLC (MPTC)

Application for Membership and Indemnity and Release form

Applicant Name: _____

Partner Name: _____

Address: _____

Phone (h): _____ Phone (mobile): _____ Phone (w) _____

Phone (other): _____ email: _____

Emergency Contact: _____

MPTC, LLC owns and operates a private business which is situated on land owned by The Red Mouse Club, located at 3752 County Rd. P, Cross Plains, WI 53528. MPTC Club Members (hereafter referred to as MEMBERS) have paid dues to MPTC, LLC for the sole purpose of playing Platform Tennis, and are members in good standing. MEMBERS understand that the owners of MPTC, LLC and volunteers, and the owners and staff of The Red Mouse Club, LLC (hereby referred to collectively as OWNERS), will do everything in their power to avoid any injury to all participants of Platform Tennis on the court(s) owned by MPTC, LLC. MEMBERS understand that because of the nature of sport, contact and heavy physical exertion will occur on these courts and premises. In return for being allowed to participate in the sport of Platform Tennis, MEMBERS release, indemnify, hold harmless, and agree not to sue OWNERS. Members specifically agree not to sue OWNERS for any injuries incurred while playing Platform Tennis.

Insurance: OWNERS do not carry insurance covering the use of the facility by MEMBERS, or the property of MEMBERS. OWNERS will not be responsible for any injuries or property damage resulting, caused by, or growing out of the use of the facilities of either MPTC, or The Red Mouse Club. MEMBERS do hereby release and discharge OWNERS from any and all liability from loss, injury (including death), or for damages to the person or property sustained while in or on the premises of The Red Mouse Club, including but not limited to fire, theft and windstorm, hail, rain, ice, condition of the facility or premises, collision or accident, or any act of God. MEMBERS agree to keep their person, activities and property fully insured with complete accident and health coverage and property insurance as may be applicable.

By signing this form, I acknowledge I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

Signed: MPTC Member _____

MPTC Member _____

(mail application with payment to: MPTC 21 Southwick Circle Madison, WI 53717)

Record of MPTC Club Membership Payment:

This receipt shows that _____

has paid \$_____ to join MPTC, LLC with a INDIVIDUAL / FAMILY / NPT-Individual membership, and is a member in good standing until August 31, _____

MPTC Officer Signature: _____