



# Fall Pickleball 101

City of Cheyenne Recreation Division

Description: Pickleball is a paddle sport that combines elements of tennis, ping pong, and badminton into one. It is one of the country's fastest growing sports and is meant for all ages and skill levels. This class is an introduction to Pickleball, meant for **beginners** who are trying to familiarize themselves with the sport.

Fee: \$50 per person  
\$10 Late Fee if registered after September 17, 2020

Dates & Times: Starts October 13, 2020  
Ends November 19, 2020  
Every Tuesday and Thursday, 9am-11am

Location: Youth Activity and Community Center  
(1317 Parsley Blvd.) indoor courts.  
Please remember to bring water!

Participant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
Gender: Male: \_\_\_\_\_ Female: \_\_\_\_\_

For more information, please visit [www.cheyennerec.org](http://www.cheyennerec.org)

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*The mission of the Recreation Division is to enrich the quality of life through providing cost-effective opportunities for recreational activities, focusing on life-long wellness through exceptional programs, activities, and events for all ages in the community.*

**Pickleball 101  
Assumption Risk, Waiver and Release**

*The undersigned acknowledges that novel coronavirus (COVID-19) infections have been confirmed throughout the United States, including several cases in Wyoming. In accordance with the most recent guidance and protocols issued by the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), the Wyoming Department of Health and the Laramie County Department of Health, for slowing the transmission of COVID-19, the undersigned hereby agrees, represents, and warrants that neither the undersigned, nor parent/guardian shall visit or utilize the facilities, services or programs of the Cheyenne Recreation Division within 14 days after*

- (i) Returning from highly impacted areas subject to a CDC Level 3 Travel Health Notice*
- (ii) Exposure to any person returning from areas subject to a CDC Level 3 Travel Health Notice*
- (iii) Or exposure to any person who has a suspected or confirmed case of COVID-19.*

*The CDC Travel Health Network is continuously updating this list and the undersigned agrees that they are aware of this list.*

*The undersigned hereby agrees, represents and warrants that neither the undersigned nor minor children shall visit or utilize the facilities, services or programs of the Cheyenne Recreation Division if he or she*

- (i) Experiences symptoms of COVID-19, including, without limitation, fever, cough or shortness of breath, or*
- (ii) Has a suspected or diagnosed/confirmed case of COVID-19.*

*The undersigned agrees to notify the Cheyenne Recreation Division if he or she believes that any of the foregoing access/use restrictions may apply.*

*The undersigned fully understands and appreciates both the known and potential dangers of utilizing the facilities, services and programs of the Cheyenne Recreation Division and acknowledges that participating in such programs and even entering the public facility, may, despite the reasonable efforts of the City of Cheyenne to mitigate such dangers, result in exposure to COVID-19, which could result in quarantine requirements, serious injury, disability and/or death.*

*I, the undersigned, agree and acknowledge that there are hazards associated to participating in a City of Cheyenne, Recreation Division Sport Activity, including, but not limited to physical injuries such as sprains, strains, twists, cuts, scrapes, or bruises, and surface hazards or equipment failures. I fully assume all risks associated with my participation in the City of Cheyenne Recreation Sport Activity. I hereby waive, release, and discharge for myself, my family members, heirs, administrators and assigns, any and all rights and claims which I have, or which may accrue to me, against the City of Cheyenne and the City of Cheyenne's Recreation Division. Further, I will hold the City harmless from any and all liabilities and provide, for the defense of the City, in the event the City is sued as a result of my alleged negligence. If I am injured and require medical care, I consent to such care. I hereby certify that I have fully read and understand the foregoing legal document and sign it knowingly, and voluntarily.*

Participant's Name (Print): \_\_\_\_\_

Participant's Signature: \_\_\_\_\_