

Incline Village Parks & Recreation  
980 Incline Way, Incline Village, NV, 89451  
Phone: 775.832.1310  
Fax: 775.832.1380  
E-mail: parksandrec@ivgid.org



Incline Village Golf Courses  
955 Fairway Blvd (CH) & 690 Wilson Way (MT)  
Incline Village, NV 89451  
Championship Course (CH) Phone: 775.832.1146  
Mountain Course (MT) Phone: 775.832.1150  
E-mail: info@golfincline.com

**Incline Village Parks & Recreation and Golf Courses**  
**Activity/Pass/Membership Waiver of Liability and Media Release**  
**Please submit in person at the Recreation Center or by email: parksandrec@ivgid.org**

Recreation privileges are in compliance with IVGID's Ordinance 7. Visit [www.inclinerecreation.com](http://www.inclinerecreation.com) for more information.

**Participant Names (Please Print):**

- |           |           |
|-----------|-----------|
| (1) _____ | (4) _____ |
| (2) _____ | (5) _____ |
| (3) _____ | (6) _____ |

**WAIVER OF LIABILITY: PLEASE READ, INITIAL AND SIGN (A parent or guardian of a minor child must initial & sign on behalf of the minor child)**

**PASS PRIVILEGES:** The Membership Pass as well as all products granting admission to Incline Village General Improvement District (IVGID) facilities are property of IVGID and may be confiscated, revoked, or suspended at any time for (1) failing to adhere to IVGID's policies, ordinances, procedures and regulations (Rules and Regulations), (2) endangering oneself or others, (3) causing a nuisance/ disturbance to the public, and (4) any violations of applicable law. Any commercial activities on IVGID property not expressly authorized by IVGID in writing are prohibited.

Initials: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_ (5) \_\_\_\_\_ (6) \_\_\_\_\_

**MEDIA RELEASE:** The undersigned consents to be photographed and/or quoted and irrevocably grants a worldwide, perpetual license to IVGID to use and incorporate photographs, video footage, digital images, verbal quotes, and all other forms of media, including derivative works, taken at any IVGID facility or program/event for any commercial and other lawful purposes. This license granted is unconditional and without limitation as to time or method of use including but not limited to printed materials, websites, and social media.

Initials: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_ (5) \_\_\_\_\_ (6) \_\_\_\_\_

**INHERENT RISKS:** In consideration of participating in any way in an event at an IVGID facility, IVGID-sponsored sport/activity/program, or related events and activities, the undersigned acknowledges, appreciates, and agrees that the inherent risks of injury and illness to myself and/or my minor child (including communicable diseases such as MRSA, influenza, and COVID-19) from the activities involved in these programs are significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury, illness, or death will exist and cannot be eliminated, and that I hereby voluntarily agree to assume these risks in consideration of being allowed to participated in events at an IVGID facility, IVGID-sponsored sport/activity/program, or related events and activities.

Initials: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_ (5) \_\_\_\_\_ (6) \_\_\_\_\_

**MEDICAL CARE:** I expressly consents to IVGID furnishing first aid care to myself or my minor child in emergency circumstances where I am unable to consent or refuse consent for treatment, including but not limited to, emergency transportation to a facility where appropriate emergency medical care can be provided. I understand that the furnishing of medical care is in no way an admission or an assumption of liability on the part of IVGID or its officers, agents, or employees.

Initials: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_ (5) \_\_\_\_\_ (6) \_\_\_\_\_

**WAIVER OF LIABILITY:** To the fullest extent permitted by law, I hereby, for myself, for my minor, and/or for my heirs, executors, and administrators, do hereby **RELEASE, HOLD HARMLESS, AND INDEMNIFY** IVGID, its officers, representatives, agents, trustees, and employees (collectively, "Released Parties"), from any and all liability for any claims, losses, liabilities, or damages (including for bodily injury or death, or property damage), that may arise due to my participation or my minor child's participation in any IVGID event/sport/activity/program or use of IVGID facility, and hereby covenant not to sue the Released Parties, for any such claims, losses, liabilities or damages, regardless of whether or not they were caused by the Released Parties' negligence. Notwithstanding the foregoing, this paragraph shall not be deemed to require the release of any claims caused by the gross negligence, recklessness, or intentional conduct of the Released Parties but only to the extent such release of claims would be prohibited by Nevada law.

Initials: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_ (5) \_\_\_\_\_ (6) \_\_\_\_\_

**RULES AND REGULATIONS:** I have read and understand the Rules and Regulations. I understand a copy of the Rules and Regulations is available to me at my request. I and/or my dependents acknowledge that we have read, understand, and will abide by the Rules and Regulations governing the use of IVGID facilities and programs.

Initials: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_ (5) \_\_\_\_\_ (6) \_\_\_\_\_

**I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND INCLINE VILLAGE GENERAL IMPROVEMENT DISTRICT AND I SIGN IT OF MY FREE WILL.**

Emergency Contact	Relationship	Date
Primary Phone Number:	Secondary Phone Number:	
(1) Signature	(4) Signature	
(2) Signature	(5) Signature	
(3) Signature	(6) Signature	