



Please Email the Incident Report and all Documents to:

Suzanna Bezyan suzanna.bezyan@usabadminton.org and Zuleima Martinez zmartinez@usabadminton.org

USA BADMINTON INCIDENT REPORT

It is important to have written incident reports on file regarding injuries, property damage or other incidents that may result in a liability claim against you. Many such claims allege negligence, and written reports prepared immediately after an incident occurs are invaluable in defending these types of claims. In the event of a serious injury, it is important to ask for written statements from witnesses and individuals involved in the incident. One copy of the report should be kept on file with your sports organization for at least three years since many lawsuits are filed long after the injury occurs.

Attach any additional information that might be helpful in defense of a future claim, such as: police report, doctor's statement, pre-game inspection report, routine facility maintenance report, photos taken at the time of the incident and written statements of witnesses.

Medical treatment will be provided for emergency situations. USA Badminton shall accept no responsibility for the expense of medical care. Any irregularity or physical ailment or injury suffered by an athlete or team official shall be reported immediately to the Tournament Director and the USA Badminton office.

USA Badminton's Program Director will ensure that all incident reports are completed and forwarded to the proper parties.

USA Badminton is held harmless with respect to any and all such injury, paralysis, dismemberment, death, and/or loss or damage to property, except that which is the result of gross negligence and/or wanton misconduct.

This report is to be completed by: USA Badminton representative (coach, tournament director, etc.) for incidents occurring during tournament, club, and/or team activity.

1. GENERAL INFORMATION: Date

and Time of Incident: Date and _____

Time of Report: _____

Reporter's Name: _____ Position: _____

Address: _____

Telephone: (H) _____ Work _____ Cell _____

Event/Activity: _____

Location of Incident: _____



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2. DETAILS:

Provide full description of all events leading up to and including the incident:

(Include details on all factors which led to or contributed to the incident. Be factual.)

3. DESCRIBE INJURY: (If an Injury is involved, please provide the following)

4.

Position: ____ Player ____ Coach ____ Official ____ Spectator ____ Other ____ (Specify where on the body, right or left side, severity of injury, etc.): _____

_____ Was

First Aid Treatment required? ____ If yes, who provided? _____ Please provide description of surroundings facility condition, weather condition, etc.:

4. DATE INCIDENT REPORTED: _____ TIME: _____

If date of report is different than date of incident, what factors caused the lapse in time?

Action taken: _____

Witness: _____



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USA BADMINTON WAIVER AND RELEASE OF LIABILITY

Note: This form must be read and signed before the participant is permitted to take part in event sessions. By signing this agreement, the participant affirms having read it.

In consideration of my involvement at the _____ under the auspices of USA Badminton and _____, I acknowledge, appreciate, and agree that:

1. I risk bodily injury, including paralysis, dismemberment, disability, and death, and while particular rules of the sport, equipment, and discipline may reduce this risk, this risk of injury does exist, as well as the risk of damage to or loss of property.
2. I knowingly and freely assume all such risk; both known and unknown, even if arising from the negligence of the releasees or others;
3. I willingly agree to comply with the customary terms and conditions for participation. If, however, I observe any unusual or unnecessary hazard during my presence or participation or if I observe any concern in my readiness for participation, I will immediately bring such to the attention of the nearest official and refrain from participation; and
- 3a. I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, hold harmless and promise not to sue USA Badminton, the committee, their respective sponsors, or the respective officers, directors, volunteers, staff, sponsors and/or agents of any of them (collectively, the "releasees") with respect to any and all injury and loss arising from my participation, whether caused by the negligence of the releasees, the condition of the premises or otherwise, except that which is the result of gross negligence or wanton misconduct, to the fullest extent permitted by law. I give permission for emergency medical treatment to be administered as deemed appropriate. Included within the release above, I release and forever discharge the releasees from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with my participation.
4. I agree to be bound by the rules and regulations of the Badminton World Federation and those of USA Badminton and I hereby stipulate that I am eligible to play in the events for which I am applying and that I understand that the above mentioned make no representation or warranty with respect to the condition of the premises or the operation of the event.
5. I hereby grant to USA Badminton, its licensees and contractors, including photographers, all right, title and interest in and to any and all photographic images and video or audio recordings of whatever kind or type in any medium, made by or for USA Badminton during the event, including the right to film or videotape me during matches, narratives or personal interviews, or the right to comment thereon for any and all commercial, news or other purposes, together with the right to transfer or grant such rights to others, and to all royalties, proceeds and/or other benefits derived from such photographs and recordings, all without remuneration or compensation to me whatsoever.
6. I acknowledge that my participation may be conditioned upon my submission to drug testing and that the use of methods or substances prohibited by applicable anti-doping rules may subject me to penalties including, but not limited to, disqualification and suspension.

I have read this Release of Liability and Waiver Agreement, fully and understand the terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement. And I further acknowledge by their presence that I am aware that DRUG TESTING may occur at this event.



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Participant's Signature	Date of Signature
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Participants Name (Printed)	USAB Membership Number #	USAB Membership Expiration date
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For Participants of Minority Age
This is to certify that I/We as parent(s)/ guardian(s) with legal responsibility for this participant, do consent and agree not only to his/her release, but also for myself, ourselves and my/our child involvement as stated above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent(s)'s/ Guardian(s)'s Signature(s)	Date of Signature
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Participants Name (Printed)	USAB Membership Number #	USAB Membership Expiration date
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EMERGENCY INFORMATION

Contact: _____ Telephone No. _____