



Please support pickleball on the Palouse by joining our non-profit. Members get email communication regarding tournaments, clinics, and open play. We provide the ball for play at the HIRC and are actively raising money to speed up the installation of courts at Mountain View Park. We need your help!

Palouse Pickleball Club Membership Form

Last Name: _____ First Name: _____

(PLEASE PRINT)

Mailing Address: _____

City/State/Zip: _____

Email Address: _____ Phone: _____

Check this box if you do not wish to receive club emails.

Emergency Contact Name: _____ Phone: _____

****Please provide any updates above, as needed, to the membership committee****

Annual dues are \$20.00 per person per fiscal year,
January 1 to December 31 and will not be prorated for a partial year.
(We gladly accept and appreciate donations at any time to our non profit.)

Dues Amount Enclosed: \$ _____

Agreement, Release & Waiver of Liability:

I recognize and understand that there are certain inherent risks to which I will be exposed because of the nature and level of the sports activity in which I have agreed to participate. I understand and agree that the PPC, their agents and officials assume no responsibility for injury or illness that I, or any additional family members, may sustain as a result of my physical condition or our participation in any PPC events. I understand it is my responsibility to provide my own accident and health insurance coverage and that PPC, their agents and officials, do not provide any accident or health insurance for their participants or volunteers. I also give permission for the PPC to use or distribute, without limitation or obligation, any record of events which may include my voice or image. As evidenced by my signature, thereby, for my heirs, administrators and assigns, release, waive and hold harmless the PPC, their agents, and officials from any manner of claims or lawsuits that may result from my participation, or the participation of any additional family members, in this sport.

Signature: _____ Date: _____

Venmo:

OR Mail or hand the form and payment to the Palouse Pickleball Club c/o:

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