

NASA LANGLEY EXCHANGE ACTIVITIES ELIGIBILITY CERTIFICATION

I hereby certify that I am eligible to participate in the NASA Langley Exchange Activities league/club based on (please check the applicable status):

- Employment with/retirement from NASA
- Spouse/Dependent of NASA Langley employee (sponsored participation)
- Employment with NASA Langley contractor
- Spouse/Dependent of NASA Langley contractor (sponsored participation)
- Grand Fathered with Letter

Fill in your name, if you are a NASA/contractor employee, or the name of the NASA/contractor employee sponsoring your participation

_____, _____, _____
Name of Employee NASA Organization/company Employee Phone Number

Check the NASA Langley league/club in which you will participate:

- | | | |
|---|---|--|
| <input type="checkbox"/> Aerobics | <input type="checkbox"/> Amateur Radio Club | <input type="checkbox"/> Amateur Satellite |
| <input type="checkbox"/> Apicultural Club | <input type="checkbox"/> Astronomy Club | <input type="checkbox"/> Basketball |
| <input type="checkbox"/> Bicycle Safety | <input type="checkbox"/> Bowling | <input type="checkbox"/> Bridge Club |
| <input type="checkbox"/> Flag Football | <input type="checkbox"/> Garden Club | <input type="checkbox"/> Golf Assn |
| <input type="checkbox"/> Karate | <input type="checkbox"/> Memory Mates | <input type="checkbox"/> Runners Club |
| <input type="checkbox"/> Soccer Club | <input type="checkbox"/> Softball | <input type="checkbox"/> Tennis League |
| | | <input type="checkbox"/> Volleyball League |

Participant's Name _____
(Please print)

Participant's Address _____
(Mail Stop/Street Address) (City) (State) (Zip)

E-Mail Address _____ Work Telephone _____

Home Telephone _____

Signature _____ Date _____

**LANGLEY ACTIVITIES ASSOCIATION
PARTICIPANT WAIVER OF RIGHTS AND CLAIMS
FOR PERSONAL INJURY AND PROPERTY DAMAGE**

I am aware that the activities of the Langley Activities Association (LAA) league(s) and/or club(s) involve the possibility of bodily injury and/or property damage from risks and dangers that include, but are not limited to, physical exertion, physical contact between participants, playing conditions, the conditions of playing fields or courts, mechanical devices, and equipment used in the league(s) and/or club(s).

I understand and agree that neither NASA, NASA Langley Research Center, NASA Langley Activities Association, the Federal Government, nor their employees warrant or guarantee my safety from property damage or personal injury or harm of whatsoever kind or nature that might result from my participation in LAA league(s) and/or club(s).

AS A CONDITION TO MY PARTICIPATION IN LAA LEAGUE(S) AND/OR CLUB(S) INDICATED ON MY ELIGIBILITY CERTIFICATION, I HEREBY VOLUNTARILY, INTELLIGENTLY, AND KNOWINGLY WAIVE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES FOR ANY PROPERTY LOSS OR PERSONAL INJURY OF WHATSOEVER NATURE OR KIND WHICH MAY HEREAFTER ACCRUE TO ME AS A RESULT OF ANY AND ALL INJURIES (BODILY INJURY OR PROPERTY DAMAGE) I MIGHT SUFFER FROM MY PARTICIPATION IN LAA LEAGUE(S) AND/OR CLUB(S).

This waiver of liability shall remain in effect until such time as I am no longer eligible to participate in or am participating in LAA activities based on the employment information given above.

Participant's name (please print)

Participant's signature Date