

NAME OF APPLICANT _____

PARENT'S OR GUARDIAN'S AUTHORIZATION FOR
SWIMMER'S PARTICIATION IN KINGSTON ESTATES
SWIM CLUB COMPETITIVE SWIM TEAM

As the parent or guardian of _____ (swimmer's name),
I do hereby request and authorize the Board of Directors of the Kingston Estates
Swim Club to permit my child or ward to participate in the competitive swim
program, inclusive of customary trips in connection with such activity during the
year.

Realizing that such activity involves the potential for injury which is
inherent in all sports, I acknowledge that even with the best coaching, use of the
most advanced protective equipment and strict observance of rules, injuries are still
a possibility. On rare occasions these injuries can be so severe as to result in total
disability, paralysis or even death.

I do hereby accept full responsibility for his or her acts while so engaged and in
consideration of permission granted _____ (swimmer's name)
to participate in the above described activity, hereby release the Kingston Estates
Swim Club and its officers, employees, and agents of said Club from any and all
claims of liability for personal injury, known or unknown, and injuries to property,
real or personal caused by, occurring in connection with, or arising from the above
described Club activity.

I, the undersigned, have read this release and understand all of its terms. I
execute it voluntarily with full knowledge of its significance.

Signature of Parent or Guardian _____

Signature of Swimmer _____

Date _____