

WAIVER/RELEASE OF LIABILITY

PLEASE READ CAREFULLY BEFORE SIGNING. THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS

I, _____, the parent or guardian of the participant agree and understand that swimming is a HAZARDOUS activity. I recognize that there are risks inherent in the sport of swimming, including but not limited to, paralyzing injuries and death.

The participant agrees to participate in the Tri-County Swimming Pool Association swim program (TCSPA) and hereby agrees to indemnify and hold harmless Kingston Estates Swim Club, its coaches, officers, directors, agents and employees against any liability resulting from any injury that may occur to the participant while participating in the TCSPA. The participant also agrees to indemnify Kingston Estates Swim Club for any damages incurred arising from any claims, demands, actions, or cause of action by the participant.

The participant authorizes any representative of Kingston Estates Swim Club to have the participant treated in any medical emergency during their participation in TCSPA. Further, the participant and/or parent/guardian agree to pay all costs associated with medical care and transportation for the participant.

I have noted on the back of this form any medical/health problems of which the staff should be aware.

**I HAVE CAREFULLY READ THE ABOVE LIABILITY
RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS
CONTENTS AND SIGNIFICANCE.**

PARTICIPANT(S): _____

Signature of Parent/Guardian _____ Date: _____