

SWIMMING PROGRAM

Family Name: _____

Children's Names: _____ Age: _____ Level: _____

Children's Names: _____ Age: _____ Level: _____

Children's Names: _____ Age: _____ Level: _____

Children's Names: _____ Age: _____ Level: _____

Children's Names: _____ Age: _____ Level: _____

Parent's Information:
(Please Print)

Parent/Guardian (first, last)

Emergency Phone Number

Please list any special considerations:

Town of Templeton
P O Box 620, 160 Patriots Road
East Templeton, MA 01438

TEMPLETON VOLUNTEER SWIM PROGRAM
WAIVER OF LIABILITY/ASSUMPTION OF ALL RISKS

I acknowledge that I have voluntarily applied to participate in the Town of Templeton Volunteer Swim Program ("Program") under the direction of the Templeton Recreation Commission to be held at the Templeton Fish and Game Club with knowledge that it may involve certain risks and/or hazards including, but not limited to the use of tools and equipment by myself, my minor children, other volunteers, as well as the town of Templeton, Town sponsors, employees, agents, members, staff and other individuals insisting in promoting/or conducting who are otherwise affiliated with the Program ("the Release"). I fully understand, acknowledge and recognize that such risks and activity may be beyond the accepted safety and health standards of my life at home or work, yet they will contribute to my enjoyment and are a reason for my voluntary participation.

I agree to be responsible for my own welfare, and accept any and all risks of delay, unanticipated events, illness, injury, emotional trauma or death of myself, and/or any and all minors participating pursuant to my permission.

RELEASE

In executing this Release of Liability and Assumption of All Risks and in consideration for being permitted to participate in the Program, I hereby **RELEASE AND DISCHARGE THE RELEASEES FROM AND AGAINST ANY AND ALL LIABILITY WITH THE PROGRAM, AND EACH PARTICIPATION IN THE PROGRAM.** I further agree this release shall be legally binding upon myself, all minors under the age of 21 participating pursuant to my permission, my heirs, successors, assign, and legal representatives; it being my intention to fully assume all risk of participation in the Program and to release any and all of the aforementioned parties from any and all liabilities to the maximum extent permitted by law.

I understand that my and/or minor(s) participation in the Program is contingent upon acceptance by the Town of Templeton.

I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

KNOWING AND VOLUNTARY EXECUTION

I have carefully read and fully understand the contents and legal ramifications of the safety rules and legal ramifications of this Agreement. I understand this is a legally binding and enforceable contract. I am fully aware that by signing this document I am releasing the above-mentioned parties from liability that may arise as a result of intentional or negligent acts of the Releases and it is my intent to release the Releasees from liability relating to any accident, injuries, including but not limited to physical, mental or emotional injury, as well as property damage, or death that may occur while participating in the Templeton Volunteer Swim Program. I sign it of my own free will. If I had any questions or issues about this document, I have asked those questions and I have been provided with complete information, which was fully responsive and to my satisfaction. I have had an opportunity to consult an attorney prior to signing this consent.

Executed this _____ day of _____.

SIGNATURE OF APPLICANT _____

(Parent or guardian must sign if applicant is under 18 years of age)