

# **ELIZABETHTOWN AQUATIC CLUB**

## **WAIVER/RELEASE OF LIABILITY**

***PLEASE READ CAREFULLY BEFORE SIGNING.***

***THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.***

I, \_\_\_\_\_, the enrolled participant(s) as listed on the EAC REGISTRATION FORM and/or the parent/guardian of the participant(s) 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(s) hereby agrees to participate in the Elizabethtown Aquatic Club program and hereby agrees to indemnify and hold harmless Elizabethtown Aquatic Club, its coaches, officers, directors, agents and employees against any liability resulting from any injury that may occur to the participant(s) while participating in this program. The participant(s) also agrees to indemnify Elizabethtown Aquatic Club for any damages incurred arising from any claims, demand, action or cause of action by the participant(s).

The participant(s) authorize any representative of Elizabethtown Aquatic Club to have the participant(s) treated in any medical emergency during their participation in this program. Further, the participant(s) and/or parent/guardian agree to pay all costs associated with medical care and transportation for the participant(s).

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.**

Signed: \_\_\_\_\_  
(Participant or Parent/Guardian)

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
(Participant or Parent/Guardian)

Date: \_\_\_\_\_