

# Lower Bucks Swim League, Inc.

## Waiver and Release of Liability

Last Name												First Name												M.I.	
Street Address																		AreaCd		Phone #					
																				-					
City												St		ZIP+4				Age		Sex					
														-				as of June 15		M/F					
Name of Swimming or Diving Team																		Birthdate							
																		Mo		Day		Yr			

In consideration of being allowed to participate in any Lower Bucks Swim League (L.B.S.L.), Inc. athletics/sports program, and related events and activities, the undersigned does:

1. Agree that prior to participating, the parent(s) or legal guardian(s) will instruct the minor participant that prior to participating, he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk or serious injury, including permanent disability or death, and severe social and economic losses which might result not only from their own actions, inactions or negligence but the actions, inactions or negligence of others, the rules or play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue L.B.S.L., Inc., its board members and volunteers in any position which are associated with the organization, its affiliated clubs, their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releases", from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.
5. Agree to abide by all policies set forth by L.B.S.L., Inc.

**I have read the above waiver and release, understand that I give up substantial rights by signing it and sign it voluntarily.**

Parent or Legal Guardian                      *(signature / relationship)*    Date

\_\_\_\_\_ / \_\_\_\_\_    \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Parent or Legal Guardian *(printed name)*

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