VPSC MEDICAL / LIABILITY RELEASE

I certify that I am the parent or legal guardian for my child(ren). I hereby give my permission for any supervisor, coach or other team administrator associated with the **Vancouver Pacific Swim Club** to seek and give appropriate medical attention for our child(ren) in the event of accident, injury, illness. I will be responsible for any and all costs associated with any necessary medical attention and/or treatment.

I hereby waive, release and forever discharge **Vancouver Pacific Swim Club** and associated supervisor, coach or other team administrator from all rights and claims for damages, injury, loss to person or property which may be sustained or occur during participation in **Vancouver Pacific Swim Club** activities, whether or not damages or loss is due to negligence. I hereby acknowledge that my children is (are) physically fit and capable of participation in all Swim Team activities.

By registering my child(ren) with the **Vancouver Pacific Swim Club**, I agree to participate (or allow my child(ren) and family members to participate) in the **Vancouver Pacific Swim Club**, and hereby release Vancouver Pacific Swim Club, its directors, officers, agents, coaches, and employees from liability for any injury that might occur to myself (or to my child(ren) and family members) while participating in the **Vancouver Pacific Swim Club** program, including travel to and from training sessions, swim meets or other scheduled team activities.

I agree to indemnify and hold harmless the above mentioned organizations and/or individuals, their agents and/or employees, against any and all liability for personal injury, including injuries resulting in death to me, my child(ren) and/or other family members, or damage to my property, the property to my child(ren) and/or other family members, or both, while I (or my child(ren) or family members) participating in the **Vancouver Pacific Swim Club** program.

THE PARENT/GUARDIAN MUST SIGN THIS WAIVER TO COMPLETE REGISTRATION WITH VPSC

Name: _____

Signature: _____

Date: _____

Swimmer Name(s): _____