

Registration Form for Swim Program

Child(ren) Information:

NAME: _____ Age: _____ DOB: _____ SEX: _____ LEVEL: _____

NAME: _____ Age: _____ DOB: _____ SEX: _____ LEVEL: _____

NAME: _____ Age: _____ DOB: _____ SEX: _____ LEVEL: _____

NAME: _____ Age: _____ DOB: _____ SEX: _____ LEVEL: _____

Parent/Guardian Name: _____

Physical Address: _____

Town/Village: _____

Email: _____

Phone Number: _____

WAIVER AND RELEASE OF LIABILITY

DISCLAIMER: TOWN OF CHAMPLAIN, TOWN OF MOOERS, VILLAGES OF CHAMPLAIN AND ROUSES POINT SHALL NOT BE RESPONSIBLE FOR ANY INJURY (OR LOSS OF PROPERTY) TO ANY PERSON SUFFERED WHILE PLAYING, PRACTICING, OR IN ANY WAY INVOLVED IN THE TOWN PROGRAMS FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF THE TOWN OF CHAMPLAIN, ITS AGENTS, OR EMPLOYEES.

In consideration of my child's participation, I hereby release and covenant not-to-sue the Town of Champlain, Town Board of the Town of Champlain, any of their employees, instructors, or agents, from any and all present and future claims resulting from ordinary negligence on the part of the Town or others for property damage, personal injury, arising as a result of my child's engaging in or receiving instruction in Town activities or any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by a child, assigns, or me.

Further, I understand that these programs involve certain risks, including but not limited to, neck and spinal injuries, injury to virtually all bones, joints, muscles, and internal organs, and that equipment provided for my child's protection may be inadequate to prevent serious injury. I am allowing my child to participate in this activity with knowledge of the danger involved and hereby agree to accept any and all inherent risks of property damage, or personal injury. In addition, I understand I may not always be there and in the event of an emergency, I hereby give permission for my child to be given emergency first aid treatment and/or to be examined and treated at the nearest medical facility.

I further agree to indemnify and hold harmless the Town of Champlain, Town of Mooers, Villages of Champlain and Rouses Point, and others listed for any and all claims arising as a result of my child's engaging in or receiving instruction in Town activities or any activities incidental thereto, wherever, whenever, or however the same may occur. I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of New York and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be in New York.

I affirm that I am of legal age, the child's legal guardian, and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which may be available to me for the ordinary negligence of the Town of Champlain, Town of Mooers, and Villages of Rouses Point and Champlain.

Signature of Parent/Guardian

Date