

SEAHAWKS SWIM TEAM LIABILITY RELEASE AND HOLD HARMLESS WAIVER

As a swimmer with the Seahawks Swim Team, I am agreeable to the following:

I acknowledge that I am aware that there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from:

- An outbreak of any and all communicable disease, including but not limited to, the virus “severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)”, which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof;

I understand that if I have any risk concerns, I should discuss the risks associated with my participation with Board President or Coaches, before I sign this document and before any activities begin.

Release – Minor’s Rights: In consideration of allowing me to participate in the summer swimming program, I hereby release and hold harmless the All Seasons Center facility, Seahawks Swim Team, USA Swimming and its local swimming committee and their members of its board of directors, officers, employees, volunteers, other participants, and agents (collectively, the “Released Parties”), of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I may have or sustain with respect to any and all damage and/or injury, of any type, arising out of participating in the summer swim program. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

(Print name of minor) (Signature of minor) (Date)

Release – Parents’/Guardians’ Rights: In consideration of allowing my child to participate in this USA Swimming program, I hereby release and hold harmless the Released Parties, of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I may have or sustain with respect to any and all damage and/or injury, of any type, arising from my child’s participation in the program. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Furthermore, I certify that my/minor is in good health and has no physical condition that would prevent participation in swimming. Furthermore, I agree to use my child’s personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to emergency medical treatment in the event such care is required.

(Print name of Parent/Guardian) (Signature of Parent/Guardian) (Date)