



DISTRICT 308 WAIVER OF LIABILITY AND INDEMNIFICATION FORM

The renter, Delta Aquatics, shall obtain a signed Waiver of Liability and Indemnification Form from each program participant or their parent if the participant is under 18 years of age. A copy of the [Waiver of Liability and Indemnification Form](#) is linked.

MEDICAL RELEASE WAIVER

I certify that I am the parent or legal guardian for my child(ren).

I certify, to the best of my knowledge and belief, that my child is in good physical condition and has no condition which would impair participation in the swimming program. In case of injury, of whatever kind or nature and however caused, in the event I am unable to be reached, I hereby give **Delta Aquatics, Oswego East High School/District 308**, and their respective representatives permission to act on my behalf in seeking medical treatment from any licensed physician, hospital or clinic for my child in the event that such treatment is deemed necessary while my child is participating in Delta Aquatics Swim Club activities. I give permission to those administering medical treatment to do so using methods deemed necessary. I hereby release and absolve the **Delta Aquatics, Oswego East High School/District 308**, and their respective representatives from all liability while acting on my behalf in this regard. I will be responsible for any and all costs associated with any necessary medical attention and/or treatment.

I hereby unconditionally release **Delta Aquatics**, its employees, officers, directors, and volunteers and any facility used by **Delta Aquatics** from any liability arising out of any injury to my child which may occur while my child is participating in the **Delta Aquatics** program, including, but not limited to practices, meets, travel and other team activities, or while my child is using facilities leased or used by **Delta Aquatics**.

On August 3, 2015 Illinois' Return to Play Law went into effect regarding concussion management. I certify that I have reviewed the [Concussion Information Sheet](#).

LIABILITY WAIVER

By registering my child(ren) with **Delta Aquatics**, I agree to participate (or allow my child(ren) and family members to participate) in the **Delta Aquatics Swim Team**, and hereby release **Delta Aquatics**, 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 **Delta Aquatics** 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 **Delta Aquatics** program.