Sanctioned by Southern California Swimming & USA Swimming and
Southern Pacific Masters Association & United States Masters Swimming

Masters Swimmer – Registration Form

Please Print

Swimmer's First Name	Swimmer's Last Name	MI
Street Address	City	Zip
Home Phone Number	E-Mail Address	Birth Date
Additional Phone Number	How did you hear about our team?	T-Shirt Size

Waiver, Release and Indemnity Agreement

For and in consideration of permitting (*swimmer's name*) _____ to participate in masters swimming (training and competition) sponsored by the South Bay Swim Team in the City of Hawthorne, County of Los Angeles, and the State of California.

I acknowledge that I am aware of the risks inherent in masters swimming, and understand that there is the risk of minor injury, serious injury or death while participating in athletic activities offered by South Bay Swim Team. Because of the risks of participating in masters swimming with South Bay Swim Team, I acknowledge the importance of following the coaches' instruction regarding workout techniques, training, equipment and team rules.

I hereby assume all of the risks associated with participation in masters swimming, and agree to voluntarily release, discharge, waive, relinquish and generally hold harmless the South Bay Swim Team and the City of Hawthorne, its employees, agents, representative, coaches, volunteers, athletic trainers from and against any and all claims, actions, demands, losses or liabilities for personal injury, property damage or wrongful death occurring to me, which may arise in connection with injuries suffered while participating in masters swimming. It is the intention of the undersigned, by this instrument, to exempt and relieve the South Bay Swim Team from liability for personal injury, property damage or wrongful death.

The undersigned, for me, my heirs, executors, administrators or assigns agree(s) that should any claim for personal injury, property damage or wrongful death shall be prosecuted against the South Bay Swim Team, that I shall indemnify and save harmless the South Bay Swim Team from any and all claims or causes of action by whomever or wherever made or presented for personal injuries, property damage or wrongful death.

The undersigned further acknowledges that I have read the foregoing paragraphs, and have been fully and completely advised of the potential dangers incidental to engaging in the activity and instructions of masters swimming, and am fully aware of the legal consequences of signing this document.

_____	_____	_____
Swimmer Signature	Swimmer Name (print)	Date