OAK RIDGE RECREATION & PARKS DEPARTMENT
WAIVER FOR
PARTICIPATION IN ACTIVITIES

NOTIFICATION OF POTENTIAL INJURY
Adult and Minor Form

Swimming is a physical activity requiring rapid and strenuous physical movement, and aggressive contact with other participants or equipment can occur as well as internal trauma to various parts of the body. Rules and supervision are utilized to prevent or reduce the likelihood of physical injury. However, injuries, including those to the muscle, skeletal, circulatory, and nervous systems, can occur. Facilities and equipment are not certified to be totally free from flaw, neither are administration and supervision certified to be without flaw. Under certain circumstances, flaws in any of these areas could contribute to a potential injury.

STATEMENT OF UNDERSTANDING AND ACCEPTANC OF RISK
AND RELEASE AND FINANCIAL RESPONSIBILITY AGREEMENT

I fully understand the risk of injury arising from my child's

_____ participation in the ACAC swim program
(swimmers name)

And I accept that risk as part of my participation or granting permission for my child's participation. I also agree to accept full financial responsibility for any injury that I or my child may incur as a result of my or his/her participation. I agree to release from and indemnify for any liability, now and hereafter, for any injury I or he/she may incur as a result of participating in the ACAC swim program, the City of Oak Ridge, their employees, officers, volunteers, and any other person or organization involved in providing the opportunity to participate in the ACAC swim program, as a service to myself and others. I make this agreement on behalf of myself, my heirs, and my estate in return for the services provided.

I grant full permission for organizers to use photographs of me and/or my child and quotations from me in legitimate accounts and promotions of this activity

I understand that appropriate safety equipment must be worn at all times.

_____ _____
Participant's Signature Date
(Parent or Guardian if Minor)

_____ EMERGENCY PHONE #_____

HOME PHONE # _____

Form 10-2-4
C:\wp51\docs\release04.gen