2010 **Team: _CW_**

SHRSL REGISTRATION AND RELEASE FORM

one form per swimmer

Swimmer Name _____
Last First M.I.

Address _____

City, State, Zip _____

_____ _____
Home Phone Number Email address

_____ _____ _____
Sex Birth date (MM/DD/YYYY) Age (as of 05/31/09)

Amateur Athletic Waiver and Release of Liability - Adult or Minor

In consideration of being allowed to participate in the Southwest Houston Recreational Swim League (hereinafter SHRSL) swimming program (in any manner) and related events and activities, the undersigned:

1. Agree that prior to participating, they each will inspect the facilities and equipment to be used, and if they believe anything is unsafe, they will immediately advise their coach or supervisor of such condition and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result from their own actions, inaction, or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, there may be risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue SHRSL, their respective administrators, directors, agents, coaches, and other members of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the events, all of which are hereinafter referred to as Released Parties, from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the Released Parties or otherwise.
5. Agree to abide by all UIL/SHRSL rules and regulations governing coaches and UIL participation.

Parent/Guardian Signature _____ Date _____

Participant Signature _____ Date _____
(If 18 or older)