

Sand Springs Recreational Center School Group Visit Waiver and Release

This agreement waives the liability and holds harmless Sand Springs Recreational Center, Inc. and its owners, directors, management, staff, agents, employees and/or independent contractors and their heirs, successors and assigns (hereinafter referred to as "SSRC) for any use of the services, facilities, swimming pool, grounds and/or other programs offered by SSRC. This Waiver and Release must be signed by a parent or guardian. A non-parent cannot sign this waiver for other people's children.

1. I (the parent/guardian signing below) wish for my child to utilize the services, facilities, swimming pool and/or programs offered by SSRC.
2. I hereby agree that the use of the services, facilities, swimming pool and/or programs is at my child's and my own risk. As a condition of my child's use of such services, facilities, swimming pool and/or programs, I, on behalf of myself, my family, my heirs and assigns and my child expressly agree to forever discharge, waive and release SSRC for any and all claims, demands, injuries, damages, costs, expenses, actions, or courses of action and from all acts of negligence on the part of SSRC that I or my child may have or acquire against SSRC on account of bodily injury, mental injuries, and/or property damages from any mishap, accident, loss, damages or injuries suffered by my child or others resulting from, connected with or caused by the use of SSRC's swimming pool and/or facilities whether located on or off SSRC's premises, including, but not limited to any injury resulting from mechanical defects or failure of any equipment or devices used in such services, programs, swimming pool or facilities. I further agree to defend, indemnify and hold harmless SSRC from any and all claims, losses or liability arising from, connected with or caused by my or my child's use of SSRC's services, facilitates, swimming pool and/or fitness programs whether located on or off SSRC's premises.
3. I declare and affirm that my child is in good medical and physical condition and that the use of SSRC's services, programs, facilities and swimming pool does not pose any danger to my child's (if applicable) health.
4. I, the undersigned parent or legal guardian, specifically acknowledge the potential of risk and injury involved in the use of SSRC's services, facilities, swimming pool and/or programs and do hereby assume said risk and authorize SSRC or its representatives to obtain emergency medical treatment for my child during the course of any program and agree to be responsible for the costs of said medical treatment.
5. I agree that my child will abide by the rules and regulations of SSRC, which may be posted within the facility, at the swimming pool area or issued orally and/or published and distributed. These rules may be amended at the SSRC's discretion. I agree that my child will not engage in any behavior injurious to the enjoyment of the swimming pool by other members or guests. I understand and agree that my child's use of SSRC may be immediately terminated if my (or their) behavior is not in accordance with the above.
6. I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of Massachusetts and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect, I further agree that this agreement shall be governed by the law of Massachusetts.

I have read and understand the foregoing, and acknowledge my consent to the terms of the Waiver and release for my child by signing this agreement.

Child Name: _____

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____