



*Berwick Area
Swimming Pool Association*

Waiver & Release Form for Athletes

In consideration of being allowed to participate in any athletic/sports/training events sponsored by The Berwick Area Swimming Pool Inc., (BASP) and any related events and activities held at the Ber-Vaughn Pool complex and intending to be legally bound, 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 the Manager of such condition(s) 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 not only from their own actions, but actions, inactions or negligence of others, the rules of play, or the condition of premises or of any equipment used. Further, that there may be other 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** The Berwick Area Swimming Pool Inc., its members, employees, officers, directors, agents, volunteers, its affiliated clubs, their respective administrators, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, and if applicable, owners and leasees of premises used to conduct the event, all of whom are hereinafter referred to as “releases,” from all liabilities, demands, losses or damages on account of injury including death, or damage to property, caused or alleged to be caused in whole or part by negligence of the releases or otherwise.

THE UNDERSIGNED HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

BASPA Employee (Date)

Participant Signature (Date)

Email Address

Print-Participant Name

Participant Address

Emergency Contact Name

Participant Telephone Number

Emergency Contact Telephone Number