

**CITY OF SEYMOUR  
WAIVER & RELEASE AGREEMENT**

Seymour Parks & Recreation Department  
*Aquatic Exercise*  
Waiver & Release Of All Claims

Please read this form carefully and be aware that in signing up and participating in this program, you will be waiving and releasing all claims for injuries you might sustain arising out of the program.

**YOU MUST BE ABLE TO ENTER AND EXIT THE POOL  
WITHOUT ANY ASSISTANCE FROM THE INSTRUCTOR  
IN ORDER TO PARTICIPATE IN THIS CLASS.  
RESTRICTED TO 18 YEARS AND OLDER. NO EXCEPTIONS.**

*(Acknowledgment of risk of injury clause)* As a participant in this program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages or loss which I may sustain as a result of participating in any and all activities connected with or associated with such program.

*(Waiver of claim for injury clause)* I agree to waive and relinquish all claims I may have as a result of participating in the program against the above named entity and its officers, agents servants and employees.

*(Release from liability clause)* I do hereby fully release and discharge the above named entity and its officers, agents, servants and employees from any and all claims from injuries, including death, damage or loss which I may have or which may accrue to me on account of my participation in the program.

*(Indemnity and defense clause)* I further agree to indemnify and hold harmless and defend the above named entity and its officers, agents, servants and employees from any and all claims resulting from injuries, including death, damages and losses sustained by me and arising out of, connected with, or in any way associated with the activities of the program.

***I HAVE READ AND FULLY UNDERSTAND THE PROGRAM DETAILS AND I FULLY UNDERSTAND THAT "THIS IS A RELEASE".***

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date of Signature