

**LETHBRIDGE SYNCHROBELLES SYNCHRONIZED SWIMMING
LETHBRIDGE, ALBERTA**



Consent and Release (Parent/Guardian) for Minor Guest

Please print legibly.

I, the undersigned, the lawful parent/guardian of _____ (the Swimmer) hereby acknowledge that participation by the Swimmer in a synchronized swimming practice initiated, conducted or organized by Lethbridge Synchronobelles Synchronized Swimming Club (LSSC) might result in personal injury, property damage or loss and possibly death to the Swimmer. The Swimmer and I fully understand these risks and hereby agree to participate voluntarily in said synchronized swimming practice and at our own risk.

In consideration of LSSC accepting the Swimmer's entry into the synchronized swimming practice initiated, conducted or organized by LSSC, I and my heirs, executors, administrators and assigns hereby release, save harmless and agree not to hold LSSC, its directors, officers, servants, agents, sponsors, volunteers or employees responsible for the Swimmer's personal injury, property damage or loss, death or any other claims or demands whatsoever resulting from or arising in connection with the Swimmer's participation in said synchronized swimming practice notwithstanding that any such claim or demand may arise out of the negligence of LSSC, its directors, officers, servants, agents, sponsors, volunteers or employees.

I have carefully read this Consent and Release, fully understand it and am freely and voluntarily executing it.

Dated at the City of Lethbridge, in the Province of Alberta, this _____ day of _____ A.D. 201____.

Name of Parent/Guardian: _____

Signature: _____

Name of Witness: _____

Signature: _____

Contact Information:

Swimmer's First Name: _____ Last Name: _____

Address: _____

Postal Code: _____

Phone: _____ Cell: _____

Email Address: _____

How did you hear about Lethbridge Synchronobelles Synchronized Swimming Club?
