

MT. MORRIS CONSOLIDATED SCHOOLS

AGREEMENT TO PARTICIPATE

SWIMMING POOL OPEN TO THE PUBLIC

Risks of Injury

I am aware that using a swimming pool or the facility can be a dangerous activity involving **many risks of injury**. These injuries could include the following injuries to me or others as a result of my participation:

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| 1. Bruises and cuts | 5. Partial or full paralysis |
| 2. Muscle tears, sprains and strains | 6. Death |
| 3. Broken bones | 7. and other impairments to the body or mind |
| 4. Closed head injuries | |

I acknowledge that the risk of injury will vary by the type of activities I do and my general physical condition. I understand that exceeding my physical limitations will increase the risk of injury. I hereby declare myself to be physically sound and suffering no condition, impairment, disease, infirmity, or other illness that would prevent my use of the swimming pool or facility. I acknowledge that I have been informed of the need for a physician's approval for using the facility. I also acknowledge that it has been recommended that I have a yearly or more frequent physical examination and consult with my physician about the following; type and degree of physical activity, use of swimming pool and the facility.

I acknowledge that I have either had a physical examination and have been given my physician's permission to use the swimming pool or facility, or that I have decided to use the swimming pool or facility without the approval of my physician.

Payment of Injury Expenses

I understand that the **Mt. Morris Consolidated Schools** does **not** maintain premises accident medical insurance for injuries which may be associated with this type of activity. It is either my responsibility or my parent's responsibility to provide medical insurance or other financial means for paying for facility related injuries.

Agreement

- I willingly agree to accept all responsibilities in case of accident or injury resulting from my use of the swimming pool or facility.
- I also agree that **Mt. Morris Consolidated Schools** and anyone associated with it will not be held responsible for:
...any loss, injury, or death except that caused by a **Mt. Morris Consolidated Schools'** staff or their authorized agent resulting from the staff's or authorized agent's gross negligence or intentional act.
...any loss, injury or death resulting from another user's action or failure to act related to the use of the facility.
- I also know that it is my responsibility to know and obey the safety rules and direction of staff to ensure my own safety. Failure on my part to abide by the rules of the facility can jeopardize my eligibility to continue participating in the facility.
- I certify that I am at least 18 years old unless otherwise noted below.
- My signature at the bottom of this form means that I have read, understand and agree to these terms of my using the swimming pool or facility.

Name:	Signature:	Date:
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If under 18 years of age, parent/guardian signature is required below attesting to have read, understood and agreed to the above terms:

Name:	Signature:	Date:
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