

RELEASE, ACKNOWLEDGMENT OF RISK, AND WAIVER OF LIABILITY FOR THE USE OF THE SPRINGFIELD POOL

Please read this form carefully and be aware that your signature indicates that you fully understand that by using the facilities and equipment of the pool facilities, you will be waiving and releasing all claims for injuries and illnesses you might sustain arising out of your use of the pool facilities and participation in fitness activities.

WARNING OF RISK

Activities involving the use of a swimming pool carry significant risk of sustaining injuries from slippery surfaces, foreign objects in the pool, and other general hazards associated with swimming. These hazards carry with them the risk of injury up to and including death by drowning. Proper attire, swimming ability, and safe behavior are required. You are responsible for understanding your own capabilities and limitations with respect to swimming. In addition you acknowledge there is a possibility that transmission of COVID-19 or other infectious and contagious diseases may occur and that uses of the pool and its facilities may result in the exposure to certain viruses, bacterial diseases and infections.

RELEASE OF LIABILITY

In consideration of the use of the pool facilities, and in recognition of the possible perils of the use of such facilities, I, for myself and my heirs, executors, administrators, legal guardians or representatives, and assigns, do hereby release the Town of Springfield, the Board of Trustees, its agents, officers, employees and assigns from any liability for injuries sustained from the use of such facilities and equipment, and waive all claims which I might have against the Town and/or its agents officers, employees and assigns, arising out of or connected with my use of the pool facilities. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren), wards or myself including, but not limited to, personal injury, disability, and death, illness, damage, loss, claim, liability, or expense of any kind, that I, my family and my child(ren) and/or wards may experience or incur in connection with my child(ren)'s and/or wards attendance at the pool or participation in pool activities ("Claims")

I understand and am aware that swimming and/or the recreational use of pool facilities, are potentially hazardous activities. I also understand that swimming activities involve a risk of injury and even death, and that I am voluntarily participating in these activities and using the pool facilities with knowledge of the dangers involved. I hereby agree to assume any and all risk of injury or death, including that of illness by being exposed to COVID-19 or other infectious diseases. I hereby release, covenant no to sue, discharge, and hold harmless the Town of Springfield, the Board of Trustees, its employees, agents and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs of expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Town of Springfield pool employees, agents, and representatives, before, during or after participation in pool facility activities. I am aware that this is a release of liability and sign it of my own free will.

Name of Participant: (Printed) _____

Signature of Participant

Date

Signature of Parent or Guardian (if Minor)

Date

Address and Phone No: _____

Emergency Contact: _____