

iSwimin10 Swim Lessons Release of Liability, Assumption of Risk, and Waiver Form

Participant Information

Participant's Full Name: _____

Date of Birth: _____ Age: _____

Parent/Guardian Full Name (if participant is a minor): _____

Address: _____

Phone Number: _____

Email: _____

Medical/Health Information (Please disclose any relevant conditions)

Does the participant have any medical conditions, allergies, disabilities, or injuries that may affect participation in swim lessons?

Yes No

If yes, please describe: _____

Agreement and Release

I, the undersigned parent/guardian (or participant if 18 or older), hereby give permission for the above-named participant to participate in swim lessons and related aquatic activities provided by Brande LaHaye (Coach Brande / iSwimin10).

I understand that swimming and aquatic activities involve inherent risks, including but not limited to: drowning, near-drowning, slips and falls, diving injuries, spinal or neck injuries, heart-related issues, exposure to chemicals (e.g., chlorine), interaction with water, equipment, or other participants, and other risks associated with physical activity in or near water. These risks may result in serious injury, permanent disability, or death.

In consideration of being permitted to participate in these swim lessons, I voluntarily assume all such risks and agree as follows:

- 1. Release and Waiver of Liability** I hereby release, waive, discharge, and covenant not to sue Brande LaHaye, individually, iSwimin10 (or any related business name), the homeowner or property owner where lessons are conducted, their respective agents, employees, instructors, representatives, heirs, successors, and assigns (collectively, the "Released Parties") from any and all liability, claims, demands, actions, or causes of action whatsoever arising out of or related to any loss, damage, expense, injury (including death), or property damage that may be sustained by the participant or me while participating in the swim lessons or related activities, **even if caused by the negligence** (but not gross negligence or willful misconduct) of any of the Released Parties.
- 2. Assumption of Risk** I fully understand and appreciate the risks involved in swimming lessons and voluntarily assume all responsibility for any injury, illness, damage, or loss that may occur.
- 3. Indemnification** I agree to indemnify, defend, and hold harmless the Released Parties from any claims, losses, liabilities, damages, costs, or expenses (including attorney fees) brought by or on behalf of the participant, me, or any third party arising from the participant's participation in the lessons.
- 4. Medical Authorization** In the event of injury or illness, I authorize the Released Parties to seek emergency medical treatment for the participant if I cannot be reached. I agree to be responsible for any costs associated with such treatment.

I have read this Release of Liability and Waiver Form carefully, understand its terms, and sign it freely and voluntarily without any inducement. This agreement is binding on my heirs, executors, administrators, and assigns.

Signature

Parent/Guardian Signature: _____ Date: _____

Printed Name: _____

Second Parent/Guardian (if applicable)

Signature: _____ Date: _____ Printed Name: _____