



# Brownell Talbot Aquatic Club – Masters Team

## Information Form & Release Form

Revised 8/9/18

### Brownell Talbot Aquatic Club – Master’s Program Registration Form

**PAYEE (Please Print)** \_\_\_\_\_  
Last Middle First D.O.B.

**Address** \_\_\_\_\_  
Street Apt.# City State Zip

( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Cell Phone Home Phone Email Address **REQUIRED**

**Emergency Contact** \_\_\_\_\_ ( ) \_\_\_\_\_  
Name Phone Relationship

**Participant Name** \_\_\_\_\_  
First Middle Last D.O.B.

**USMS #** \_\_\_\_\_ *(Must supply copy of USMS Card with Registration)*

**NOTE:** US Masters Membership Fee is Mandatory for participation & team insurance.

### Liability Waiver

**I HAVE READ AND UNDERSTAND AND AGREE AS FOLLOWS:** In consideration of this registration in the activities provide by Brownell Talbot School;

**RELEASE AND WAIVER OF CLAIMS:** I, \_\_\_\_\_, for myself and for my heirs, executors, and assigns do hereby knowingly, freely, and voluntarily assume risk and liability for any damage or injury to person or property that may occur as result of my participation in activities offered by Brownell Talbot School and Aquatics Department at any facility or at any other location approved by Brownell Talbot, and do hereby release, discharge and covenant not to sue, Brownell Talbot School, and its officers, employees, agents and volunteers, and hereby waive and discharge all claims for damages that I might have against Brownell Talbot School, or its officers, employees, agents, and volunteers, from and against any and all claims, damages, and judgments, of whatever nature, including attorney fees, that may be asserted or entered against any of them in connection with my participation in any activity offered by Brownell Talbot School.

**INSURANCE RESPONSIBILITY:** I as the participant understand that participation may subject me to a certain degree of risk to injury and that Brownell Talbot School will not be liable for medical expenses or for damages, based upon property damage or personal injury as a result of these activities. Any insurance protection must be obtained by participant.

**PHOTO RELEASE:** I hereby grant authorization to Brownell Talbot to use photographs of myself for publicity purposes.

By Signing below, I acknowledge that this liability waiver remains in force for the duration of my participation in the named activity offered by Brownell Talbot School.

\_\_\_\_\_  
Participant Signature DATE

\_\_\_\_\_  
Print Name DATE