TSA CHAMPIONSHIP SWIM MEET

July 20-21, 2019

WAIVER/RELEASE OF LIABILITY

PLEASE READ CAREFULLY BEFORE SIGNING.
THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.

the enrolled participant (if 18 or over)
d/or the parent/guardian of the participant agree and understand that swimming is a
AZARDOUS activity. I recognize that there are risks inherent in the sport of swimming, including
t not limited to, paralyzing injuries and death.
e participant hereby agrees to participate in the Tarheel Swimming Association Championship
vim Meet and hereby agrees to indemnify and hold harmless Tarheel Swimming Association
SA) and Triangle Aquatic Center (TAC), their officers, directors, agents and employees against
y liability resulting from any injury that may occur to the participant while participating in the
im meet. The participant also agrees to indemnify TSA and TAC for any damages incurred
sing from any claims, demand, action or cause of action by the participant.

The participant authorizes any representative of TSA or TAC to have the participant treated in any medical emergency during their participation in the TSA Championship Swim Meet. Further, the participant and/or parent/guardian agrees to pay all costs associated with medical care and transportation for the participant.

I have noted below any medical/health problems of which the staff should be aware.

I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.

Participant's				
Last Name:		First Name:		
	(Please Pr	int Clearly)		
TSA Team:			AGE:	
USA Registered swimmer:	YES	NO	(Please circle)	
Signed:			Date:	
(Participant	or Parent/Guard	dian if under 18)		
Print Parent Name:				
	(Please Prir	nt Clearly)		
List any Medical/Health proble	ms:			

All participants MUST sign this AGREEMENT TO PARTICIPATE!