

Recreational Center Injury Risk Acknowledgment

Date: _____

To Whom It May Concern,

I, _____, acknowledge that I have been informed of the potential risks associated with participating in activities at the Recreational Center. I understand that injuries can occur in any recreational activity, including but not limited to: falls, strains, sprains, or other physical harm.

By signing this document, I confirm that I am voluntarily participating in the activities offered at the Recreational Center and assume all associated risks. I also waive any claims against the Recreational Center and its staff for any injuries that may occur.

Signature: _____

Name (printed): _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____