

Swimming Lessons Waiver Form

Date: _____

Participant Information

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ Email: _____

Waiver Agreement

I, the undersigned, hereby agree to participate in swimming lessons provided by [Instructor/Organization Name]. I acknowledge that swimming involves inherent risks and I assume full responsibility for any injuries or damages that may occur as a result of my participation.

Furthermore, I release and hold harmless [Instructor/Organization Name], its instructors, staff, and affiliates from any liability for any injuries or damages incurred during the lessons.

Emergency Contact

Name: _____

Phone Number: _____

Signature

Participant's Signature: _____

Date: _____

If participant is under 18, parent/guardian must sign:

Parent/Guardian Name: _____

Signature: _____

Date: _____