



ODIN WATER POLO CLUB

Activity Agreement, Waiver, and Release

In consideration for being permitted by Odin Water Polo Club (club) to participate in water polo practice and tournaments (activity), I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance club including its officers, employees, volunteers and agents from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

I also understand that if I continue to participate in activity with club, I am obligated to register with USA Water Polo (www.usawaterpolo.com) and choose "Odin Water Polo Club" as club affiliation.

I further understand that no medical insurance is provided.

I further understand that photographs and video may be taken of me during the course of the said activity and that these photographs and video may be used for Odin Waterpolo Club publicity purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of Participant: _____

Participant Signature: _____

Date signed: _____

FOR ODIN WATERPOLO CLUB MEMBER OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

I hereby consent that my son/daughter, _____, participate in the above activity, and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity.

I also understand that if my child decides to continue to participate in activity with club, I am obligated to register my child with USA Water Polo (www.usawaterpolo.com) and choose "Odin Water Polo Club" as club affiliation.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

EMERGENCY INFORMATION

Child's Name: _____ Birth Date: _____ Sex: _____

Address: _____ City: _____ Zip: _____ State: _____

Parent/Guardian 1: _____ Cell #: _____ Email: _____

Parent/Guardian 2: _____ Cell #: _____ Email: _____

Medical Conditions: _____

This form MUST be completed and returned to Odin Water Polo Club before minor may participate.