



Aquatic Center Waiver - Child

Participant's Full Name (Last, First)

Date of Birth

Address

Primary Phone #

E-mail

Emergency Contact

Relationship

Emergency Phone #

Waiver of Liability and Assumption of Risk.

With respect to my child(ren)'s voluntary use of the Port of San Diego's Aquatic Center and its facilities (the "Aquatic Center"), owned by the San Diego Unified Port District (the "District") I understand that, as a guest of the Aquatic Center, there may be health risks associated with activities requiring physical exertion and/or aquatics, including but not limited to: transient dizziness, fainting, nausea, muscle cramping, musculoskeletal injury, sprains and strains, heart attack, stroke, drowning or death. I certify my child(ren) is/are capable of performing the exercises and activities associated with the use of the Aquatic Center, and I hereby agree to assume on behalf of myself and my child(ren) all risk of utilizing the Aquatic Center. On behalf of myself, my child(ren), our heirs, distributees, guardians, legal representatives, and assigns, (collectively, the "Releasing Party"), I hereby waive, release, discharge, and hold harmless the District, and each of its commissioners, officers, employees, agents, volunteers, contractors, permittees, sponsors, from any and all claims, liability, damages, suits, losses, or related causes of action for damages, including but not limited to claims that may result from any injury, death, or damage, accidental or otherwise, during, or arising in any way from my child(ren)'s use of the Aquatic Center. I hereby agree on behalf of the Releasing Party to indemnify the persons and entities mentioned above from any and all claims, liability, damages, suits, losses, or related causes of action for damages, present or future, which may be incurred as a result of death, injury, or property damage that my child(ren) may sustain while participating in any activities at the Aquatic Center, however, such indemnity shall not extend to claims due entirely to the active or sole negligence, or willful misconduct of the District I hereby agree that the Releasing Party will not make a claim against, sue or prosecute the District, including each of their respective commissioners, officers, employees, agents, volunteers, contractors, permittees and sponsors, for injury, death, or damage arising out of or related to my child(ren)'s participation in the Aquatic Center activities.

I hereby consent that my child(ren) participate in the Aquatic Center activities and I hereby execute this Waiver of Liability and Assumption of Risk on behalf of the Releasing Party. I have carefully read this Waiver of Liability and Assumption of Risk and by signing below and on behalf of my minor child(ren), I acknowledge that I fully understand its contents. I am aware that this is a release of liability and a contract between the San Diego Unified Port District and me, and I sign it of my free will. I further understand that no medical insurance is provided.

CONTINUED

I hereby grant my specific permission to CRSD, its employees, volunteers, regatta organizers, sponsors, advertisers, participants, agents, and assigns to make and/ or obtain photographic images of me on Camp/lesson days and to publish, copyright, distribute and/or display photographic images taken of me. I further waive the right to inspect and/or examine all photographs and/or written text to which the images may be applied before use. I also waive any, and all rights and claims, including future rights and claims to such photographic images and any interest therein. I hereby release and discharge CRSD, its employees/ independent contractors, volunteers, organizers, sponsors, advertisers, participants, patrons, agents, licensees, affiliates and assigns from any, and all liability by distortion, blurring, alteration, optical illusion, digital scanning and manipulation, and/or use in composite form, whether the same is intentional, or otherwise.

I understand that CRSD, its employees/independent contractors, volunteers, organizers, sponsors, advertisers, participants, agents, and assigns may use any process or procedure resulting in the completion of the finished product for publication, display, copyright or distribution.

I hereby grant my specific permission to CRSD, its employees/contractors, volunteers, organizers, sponsors, advertisers, participants, agents, licensees, affiliates and assigns a fully paid-up, non-exclusive, worldwide right and license to use, display or otherwise exploit my name, nickname, voice, photograph, statements, biographical information, and likeness, as well as images of me in motion picture, videotape, electronic, and similar formats (“My Image”), so long as My Image relates to my participation in the Rowing Activity, whether in original or modified form. I waive any rights of privacy.

Print Parent’s/Guardian’s full name: _____	_____
	Date

Parent/Guardian Signature	