

I understand that the sport of tennis is a physically demanding activity for persons of any age and that the nature of the sport of tennis is such that physical injury is a possibility. I hereby declare that the participant named below is in good physical health and is able to participate in the tennis program without restriction due to physical infirmity.

I, the undersigned, on behalf of myself, my executors, administrators, heirs, next of kin, successors and assigns, HEREBY WAIVE, RELEASE AND DISCHARGE, the City of Bluffton, the Mayor of Bluffton, the Common Council of the City of Bluffton, the Bluffton Board of Public Works and Safety, the Bluffton Parks & Recreation Department, and any agents, successors, assigns and employees of any of the foregoing from any and all claims or liabilities for death, personal injury, property damage, theft of damages of any kind, whether or not attributable to the negligence of the releases, as indicated above, which arise out of my child's participation in the tennis program.

I also understand that by allowing my child to participate in the Bluffton Parks & Recreation tennis program, that I'm giving permission for the free use of my likeness and that of my child or ward, in connection with any broadcast, telecast, print media or other publicity.

I HEREBY AGREE NOT TO SUE any of the persons or entities mentioned above for any of the claims or liabilities that I have waived, released or discharged herein.

I AGREE TO INDEMNIFY AND HOLD HARMLESS any person or entity mentioned above from any claims made or liabilities assessed against any of the aforementioned persons or entities which may arise as the result of my actions at or during the aforementioned event of action.

\_\_\_\_ I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT, AND UNDERSTAND IT'S CONTENTS.

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Date \_\_\_\_\_ Parent Signature \_\_\_\_\_

E-Mail Address \_\_\_\_\_

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